4/22/22, 10:28 AM

Division of Corporations



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To:

Division of Corporations

Fax Number : (8)

: (850)617-6383

From:

Account Name : LEGALZOOM.COM INC.

Account Number : I20010000062 Phone : (323)962-8600

Fax Number : (323)962-3889

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN EXPRESS PROVIDER SERVICES, PLLC

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APR 2 6 2022

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COVER LETTER Registration Section TO: Division of Corporations EXPRESS PROVIDER SERVICES, PLLC SUBJECT: Name of Limited Liability Company The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Cheyenne Moseley Name of Person Legalzoom.com, Inc. Firm/Company 101 N Brand Blvd 11th FI Address Glendale, CA 91203 City/State and Zip Code E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Cheyenne Moseley Daytime Telephone Number Name of Person Enclosed is a check for the following amount:

■ \$55,00 Filing Fee &

Certified Copy

(additional copy is enclosed)

MAILING ADDRESS: Registration Section

□ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &

Certificate of Status

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

☐ \$60.00 Filing Fee,

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(additional copy is enclosed)

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

EXPRESS PROVIDER SERVICES, PLLC	
(<u>Name of the Limited Liability Company as it now</u> (A Florida Limited Liability Con	appears on our records.) ipany)
The Articles of Organization for this Limited Liability Company were filed Florida document number <u>L22000138567</u>	on 03/21/2022 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability comp	any here:
The new name must be distinguishable and contain the words "Limited Liability Company	the designation "LLC" or the abbreviation "L L.C."
Enter new principal offices address, if applicable:	22
(Principal office address MUST BE A STREET ADDRESS)	PR
	2 7
	EO PH
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered office address here:	ress on our records, enter the name of the ne
Name of New Registered Agent:	
New Registered Office Address:	nterFloridastreetaddress
	, Florida
City	ZipCode
Now Registered Agent's Signature if changing Registered Agent:	

New Registered Agent's Signature, if changing Registered Agent

Page: 4 of 6

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address. I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

To: +18506176383

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	JAMON RALEY	215 ISLAND WATER WAY	
		APOLLO BEACH, FL 33572	■ Remove
			☐ Change
			Add
			☐ Remove
			Change
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Ifame	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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Note:	ve date, if other than the date of filing:
	ford specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 90th day after the record is filed.
Dated	APRIL 19th 2022
	Signature of a member or authorized representative of a member
	ASHLEY RALEY Typed or printed name of signee

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Filing Fee: \$25.00