

122000288212

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

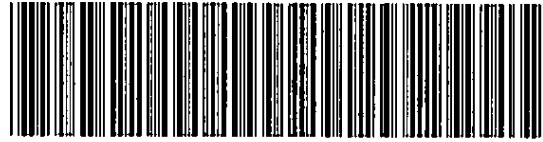
(Business Entity Name)

(Document Number)

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Amend

SEP 18 2022

D CUSHING

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ExPress Home Inspection, LLC
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:

WEENDELL Esthema
Name of Person

ExPress Home Inspection, LLC
Firm/Company

642 NW 5th Street
Address

Boynton Beach, FL 33435
City/State and Zip Code

Westhema@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

WEENDELL Esthema at (561) 503-0965
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee.
Certificate of Status &
Certified Copy
(additional copy is enclosed) |
|--|--|--|--|

Mailing Address:

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

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

EXPRESS HOME INSPECTION, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 06/27/2022 and assigned Florida document number L22000288212.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company 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:

(Principal office address MUST BE A STREET ADDRESS)

N/A

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

N/A

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

N/A

Enter Florida street address

City Florida Zip Code

New Registered Agent's Signature, if changing Registered Agent:

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

[illegible]

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

(Handwritten: A large 'X' is drawn across the lines. To the right of the 'X', the word 'Amended' is written vertically.)

E. Effective date, if other than the date of filing: _____ **(optional)**

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated _____ . _____ .

(Handwritten signature: Wendell Esthema)

Signature of a member or authorized representative of a member

(Handwritten name: WENDELL ESTHEMA)

Typed or printed name of signee



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Detail by Entity Name

Florida Limited Liability Company

EXPRESS HOME INSPECTION SERVICES, LLC

Filing Information

Document Number L22000288212
FEI/EIN Number NONE
Date Filed 06/27/2022
Effective Date 06/29/2022
State FL
Status ACTIVE

Principal Address

642 NW 5TH STREET
BOYNTON BEACH, FL 33435

Mailing Address

642 NW 5TH STREET
BOYNTON BEACH, FL 33435

Registered Agent Name & Address

ESTHEMA, WEENDELL
642 NW 5TH STREET
BOYNTON BEACH, FL 33435

Authorized Person(s) Detail

~~NONE~~ Weendell Esthema, MGR

Annual Reports

No Annual Reports Filed

Document Images

06/27/2022 -- Florida Limited Liability

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