

8/29/22, 1:54 PM

Division of Corporations

Florida Department of State
 Division of Corporations
 Electronic Filing Cover Sheet

L22000292209370096

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To:

Division of Corporations
 Fax Number : (850)617-6383

From:

Account Name : ALC CONSULTING SERVICES INC
 Account Number : I20200000139
 Phone : (407)362-8056
 Fax Number : (407)386-6503

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

Email Address: EXPRESSSOLUTIONSMA@GMAIL.COM

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
EXPRESS SOLUTIONS MA LLC

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Electronic Filing Menu

Corporate Filing Menu

T. LEMIEUX
 Help AUG 30 2022

COVER LETTER

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**TO: Registration Section
Division of Corporations**

SUBJECT: EXPRESS SOLUTIONS MA 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:

LORENA C RIOS

Name of Person

ALC CONSULTING SERVICES INC

Firm/Company

520 NORTH SEMORAN BLVD STE 255

Address

ORLANDO, FL 32807

City/State and Zip Code

EXPRESSSOLUTIONSMA@GMAIL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

LORENA C RIOS

407

362-8056

at (_____) _____

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &
Certificate of Status

☐ \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

MailingAddress:

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

StreetAddress:

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

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

EXPRESS SOLUTIONS MA 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 AUGUST 23, 2022 and assigned
Florida document number L22000370096.

This amendment is submitted to amend the following:

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

N/A

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:

N/A

(Principal office address **MUST BE A STREET ADDRESS**)

Enter new mailing address, if applicable:

N/A

(Mailing address **MAY BE A POST OFFICE BOX**)

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:

FRANKLIN ROFONDARO OJEDA

New Registered Office Address:

3725 CASTLE PINES LN APT 4316

Enter Florida street address

ORLANDO

City

Florida

32839

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.

Franklin Rofondaro Ojeda

If Changing Registered Agent, Signature of New Registered Agent

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

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MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	MARIELA D ROTONDARO MAGDALENO	3725 CASTLE PINES LN APT 4316	<input type="checkbox"/> Add
		ORLANDO, FL 32839	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	FRANKLIN ROTONDARO OJEDA	3725 CASTLE PINES LN APT 4316	<input checked="" type="checkbox"/> Add
		ORLANDO, FL 32839	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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