Division of Corporations

Florida Department of State

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H23000232843 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6383

From:

: PROMINENT SERVICES INC Account Name

Account Number : I20150000063

: (305)889-2880

Fax Number

: (305)889-2881

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

Electronic Filing Menu

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN STERLING XPRESS LLC

Certificate of Status	1
Certified Copy	0
Page Count	01
Estimated Charge	\$30.00

Corporate Filing Menu

Help

23000232843

JUL 0 5 2023

K. Brumbiay

			COVER LETTI	ER	\
	gistration Sec rision of Corp			(H2300	0232843 3
our more.	_	XPRESS LLC			
SUBJECT:		Name of Lim	ited Liability Company		
The encloses	d Articles of A	mendment and fec(s) are sub	mitted for filing.		
Please return	all correspon	dence concerning this matter	to the following:		
		CYNTHIA VELASQUEZ			
			Name of Person	-	
		PROMINENT SERVICES	INC		
			Firm/Company		
		6912 NW 72 AVE			
			Address		
		MIAMI, FL 33166			
		LIZI@PSITEAM.NET	City/State and Zip Cod	le	
		E-mail address: (to be used for future annu	al report notification)	
Por further i	nformation co	ncerning this matter, please co	all:		
CYNTHIA	VELASQUEZ	2	305 8	889-2880	
	Name of	Person	Area Code	Daytime Teleph	one Number
Enclosed is	a check for the	following amount:			
□ \$25.00	Filing Fcc	■ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fe Cartified Copy (additional copy is o		\$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

(1) 23000 232 843 3

ARTICLES OF AMENDMENT (H 23000 2328433) ARTICLES OF ORGANIZATION OF

STERLING APRESS LLC		
(Name of the Limited Liability (A Florida L	Company as it now appears on our records.) imited Liability Company)	
The Articles of Organization for this Limited Liability Con Florida document number L23000215055	mpany were filed on 05/01/2023	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limite	ed liability company here:	
The new name must be distinguishable and contain the words "Limite	ad 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 ADDRE	<u></u>	
Enter new mailing address, if applicable:		
(Mailing address MAX BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered of agent and/or the new registered office address here: Name of New Registered Agent:	office address on our records, enter the	name of the new registere
		30 HAR
New Registered Office Address:	Enter Florida street address , Florid	PH SHOOVEL
	City	Ztp 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

(H230002328433)

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

(123000 2328433)

MGR = Manager AMBR = Authorized Member

Title	<u> Nаше</u>	<u>Address</u>	Type of Action
MGR	GARCIA, RICHRAD	2862 SW 152ND CT	□ Add
		MIAMI, FL 33185	■Remove
			□ Change
MGR _	GARCIA, RICHARD	2862 SW 152ND CT	∃ Add
		MIAMI, FL 33185	□Remove
			☐ Change
AMBR	GARCIA, GINA	8201 NW 56TH ST	\(\bar{\bar{\bar{\bar{\bar{\bar{\bar{
		MIAMI, FL 33166	□Remove
			Change
			DAdd
			□Remove
			□Change
			□Add
			□ Remove
			□ Add
		<u></u>	□ Remove
		(H23000	232 8433 Dehange

(H230002328433)

					·
			-		
					<u>, </u>
	<u></u>				
		· · · ·		·	
					<u> </u>
					
			<u> </u>		
				·	
iffective date, if other the fan effective date is listed, the Note: If the date insorted in locument's effective date of record specifies a delayed die filed.	n this block does not the Department	of State's records.	ble statutory filing	requirements, this	iling.) Pursuant to 605.020 date will not be listed a
d is filed.					
JUNE 30TH	1	2023	_·		
	The state of the s	of a marghan or author	rized representative o	f a member	
	\$ignature	of a mamper of wrong			
RICHARD GA	•	OI & IDENIOCI OI MILIAC	· —— · · •		