

M100000004761

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

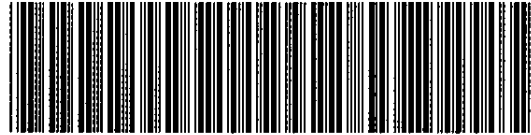
Special Instructions to Filing Officer:

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MAY 24 2011

EXAMINER

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05/23/11--01052--002 **25.00

FILED
11 MAY 23 PM 3:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Deliver Express Solutions, LLC
Name of Foreign Limited Liability Company

Dear Sir or Madam:

The enclosed application, certificate and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Ilida Cristina Alvarez
Name of Person

Deliver Express Solutions, LLC
Firm/Company

7901 Hispanola Avenue #1802
Address

North Bay Village, Fl 33141
City/State and Zip Code

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

For further information concerning this matter, please call:

Ilida Cristina Alvarez at (305) 794-8765
Name of Person Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

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

MAILING ADDRESS:

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

Enclosed is a check for the following amount:

- ☒ \$25 Filing Fee ☐ \$30 Filing Fee & Certificate of Status ☐ \$55 Filing Fee & Certified Copy ☐ \$60 Filing Fee, Certificate of Status & Certified Copy

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE
AMENDMENT TO APPLICATION FOR AUTHORIZATION TO TRANSACT
BUSINESS IN FLORIDA**

SECTION I (1-3 must be completed)

1. Name of limited liability company as it appears on the records of the Florida Department of State: DeliveRx Solutions, LLC
2. Jurisdiction of its organization: Delaware
3. Date authorized to do business in Florida: October 26, 2010

SECTION II (4-7 complete only the applicable changes)

4. If the amendment changes the name of the limited liability company, when was the change effected under the laws of its jurisdiction of organization? April 26, 2011
5. New name of the limited liability company: Deliver Express Solutions, LLC
(must end with "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must end with "Limited Liability Company," "L.L.C." or "LLC.")

6. If the amendment changes the period of duration, indicate new period of duration:
N/A
7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:
N/A
8. If the amendment corrects any false statement, indicate the statement being corrected and the correction: N/A

9. Attached is an original certificate, no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized.


Signature of a member or the authorized representative of a member

Ilida Cristina Alvarez

Typed or printed name of signee

Filing Fee: \$25.00

FILED
11 MAY 23 PM 3:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

State of Delaware
Secretary of State
Division of Corporations
Delivered 03:07 PM 04/26/2011
FILED 03:07 PM 04/26/2011
SRV 110456469 - 4883020 FILE

**STATE OF DELAWARE
CERTIFICATE OF AMENDMENT**

1. Name of Limited Liability Company: DeliverRx Solutions LLC
2. The Certificate of Formation of the limited liability company is hereby amended as follows:

The FIRST article of the Certificate of Formation is amended and restated as follows:

FIRST: The name of the Limited Liability Company is Deliver Express Solutions, LLC.

IN WITNESS WHEREOF, the undersigned have executed this Certificate on the 26th day of April, A.D. 2011.

By: 

Authorized Person(s)

Name: Ilida Cristina Alvarez

Print or Type