P14 0000 95459

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TO: Amendment Section
Division of Corporations

NAME OF CORPOR	ATION: ENB EXPRESS IN	CORPORATED	<u> </u>
DOCUMENT NUMB	ER: P16000097857	<u></u>	
The enclosed Articles of	f Amendment and fee are sul	omitted for filing.	
Please return all corresp	oondence concerning this mat	ter to the following:	
J	IAMES ROHER		
-		Name of Contact Persor	1
1	LEK LLESHI IRREVOCABI	LE LIVING TRUST COR	P
-		Firm/ Company	
:	5221 ST AUGUSTINE RD	The company	
~		Address	
-	ACKSONVILLE FLORIDA	32207	
-		City/ State and Zip Code	
j	roher01@gmail.com		
-	E-mail address: (to be us	ed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
JAMES ROHER		904 at (432=1603
Name o	f Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:
□ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ame Divis P.O.	ing Address Indiment Section Ission of Corporations Box 6327 Inassee FL 32314	Amend Divisio The C	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation oſ

JACKSONVILLE CARS INC				
(Name (of Corporation as currently	filed with the Florida Dep	t. of State)	
P14000095459				
	(Document Number of C	Corporation (if known)		
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, this Fl	orida Profit Corporation a	dopts the following ar	nendment(s) to
A. If amending name, enter the new na	ame of the corporation:			
			TF	ie new
name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered." "professional association,"	Corp," "Inc," or "Co". A	mpany," or "incorporated" professional corporation i	or the abbreviation " name must contain th	Corp.," ne word
B. Enter new principal office address, (Principal office address MUST BE A S	if applicable: TREET ADDRESS		3 2	3
				<u></u> -
C. Enter new mailing address, if appl (Mailing address MAY BE A POST			;;···. =	
				7.
D. If amending the registered agent ar new registered agent and/or the new		ss in Florida, enter the na	me of the	
Name of New Registered Agent	JAMES ROHER			
name of New Registered Agent	1906 PROMENADE WAY	#1102		
	(Florida stree			
New Registered Office Address:	JACKSONVILLE		. Florida 32207	
New Registered Office Address.		City)	Zip Cod	e)
New Registered Agent's Signature, if call hereby accept the appointment as registered.	hanging Registered Agent:		•	e)
	who hate			
	Signature of New Reg	gistered Agent, if changing	-	

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e). F.S.

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Example:

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	<u>P</u>	Lek LLeshi	5221 ST AUGUSTINE RD
Add X Remove			
2) Change	p	James Edward Roher	5221 ST ST AUGUSTINE RD
Add			Packsopville FL 32207
Remove Change			
Add			
Remove			
4) Change Add			
Remove			
5) Change			
Add Remove			
6) Change			
Add			
Remove			

	ry). (Be specific)
A	
· · · · · · · · · · · · · · · · · · ·	
<u>If an amendment provides for an e</u>	exchange, reclassification, or cancellation of issued shares,
(if not applicable, indicate N/A)	amendment if not contained in the amendment itself:
• • • •	1)
A	
A	
4	
1	
4	
A	
A	
Α	
A	
A	

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7/10/2023	
The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
7/10/23	
Effective date if applicable: (no more than 90 days after amendment fil	a data)
(no more than 90 days after amenament fit	e date)
Note: If the date inserted in this block does not meet the applicable statutory filing requidocument's effective date on the Department of State's records.	rements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the incorporators, or board of directors without action was not required.	shareholder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for by the shareholders was/were sufficient for approval.	the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The funust he separately provided for each voting group entitled to vote separately on the ame	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by"	
by	
7/10/2023	
Dated	
Signature Jemis Kohi	
(By a director, president or other officer - if directors or officer	
selected, by an incorporator – if in the hands of a receiver, trust	ee, or other court
appointed fiduciary by that fiduciary)	
JAMES ROHER	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	

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