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08 MAR -3 PHI2: 45

SECRETARY OF STATE OIVISION OF CORPORATION

G. MCLEOD
MAR - 4 2008

EXAMINER

COVER LETTER

	tion Section
SUBJECT: Mov	ve USA, LLC
	(Name of Limited Liability Company)
The enclosed Artic	cles of Amendment and fee(s) are submitted for filing.
Please return all co	prrespondence concerning this matter to the following:
	Joel M Brown
	(Name of Person)
	(Firm/Company)
	19920 NW 10th Street
	(Address)
	Pembroke Pines, FL 33029
	(City/State and Zip Code)
For further inform	ation concerning this matter, please call:
Joel M Brown	at (954) 822-9624
	Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a chec	k for the following amount:
√ \$25.00 Filing F	Tee \$30.00 Filing Fee & \$55.00 Filing Fee & \$60.00 Filing Fee, Certificate of Status Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)

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

STREET/COURIER ADDRESS:

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

FILED SECRETARY OF STATE DIVISION OF CORPORATION:

08 MAR -3 PM 12: 45

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Move USA, LLC				
(<u>Name of the Limited</u>	I Liability Company as it now app A Florida Limited Liability Compan	<u>ears on our records.</u>) y)		
The Articles of Organization for this Limited L	iability Company were filed on 3	3/10/2005 and assigned		
Florida document number <u>L05000024290</u>	· · · · · · · · · · · · · · · · · · ·			
This amendment is submitted to amend the fol	lowing:			
A. If amending name, enter the new name o	of the limited liability company	<u>here</u> :		
The new name must be distinguishable and end w'L.L.C."	ith the words "Limited Liability Cor	mpany," the designation "LLC" or the abbreviation		
B. If amending the registered agent and registered agent and/or the new registered o		n our records, <u>enter the name of the new</u>		
Name of New Registered Agent:	Johnny Johnson			
New Registered Office Address:	1700 NW 58th Terrace,	#4B		
(Enter Florida street address)				
	Sunrise	, Florida <u>33313</u>		
	(City)	(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 608, 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.

At Changing Digistered Agent, Signature of New Registered Agent)

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member							
<u>Title</u>	<u>Name</u>	Address	Type of Action				
MGR	Joel M Brown	19920 NW 10th Street Pembroke Pines, FL 33029	Add Remove				
MGR_	Peter C. Carey	2501 NE 33rd Ave Et. Lauderdale, FL 33305	Add ✓ Remove				
MGRM_	Johnny Johnson	1700 NW 58th Terrace, #4B Sunrise, FL 33313	Add Remove				
			Add Remove				
			Add Remove				
			Add Remove				
D. If amen	ding any other information, enter cha	nge(s) here: (Attach additional sheets, if necessary.)					
			<u> </u>				
							
Dated Febr		1Pm					
	Joel M Brown	ber or authorized representative of a member bed or printed name of signee					

Page 2 of 2

Filing Fee: \$25.00