# 106000004178

N N
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

• •



11/01/17--01019--024 \*\*60.00



Office Use Only

			COVER LETTER	
	istration Se ision of Cor			
SHD IFCT.	Coleman W	Vorldwide Moving of Florida.	L.C.	
SUBJECT:		Name of Lin	ited Liability Company	
The enclosed	d Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return	all correspo	ondence concerning this matter	to the following:	
		John Coleman		
		· · · · · · · · · · · · · · · · · · ·	Name of Person	
		Coleman Worldwide Mov	ing. LLC	
		· _ · · · · · · · · · · · · · · · · · ·	Firm/Company	
		1 Covan Drive		
		· <u>·····</u> ·····	Address	
		Midland City, Alabama 36	350	
		john.coleman@colemanwg	City/State and Zip Code	
			to be used for future annual report notifica	ation)
For further in	ilormation e	oncerning this matter, please c	all:	
John Colema	un		334 983-6500	
	Name o	f Person	Area Code Daytime T	elephone Number
Enclosed is a	echeck for th	te following amount:		
□ \$25.00 F	iling 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)
	Registr Divisio	ING ADDRESS: ation Section n of Corporations 1x 6327	STREET/COURIEF Registration Section Division of Corporati Clifton Building	

. .

Tallahassee, FL 32314

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Coleman Worldwide Moving of Florida, LLC.		
( <u>Name of the Limited Liability Compa</u> (A Florida Limited	ny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number <u>106000004138</u> .	were filed on January 12, 2006	and assigned
This amendment is submitted to amend the following:		
A. If amending name, <u>enter the new name of the limited liab</u>	<u>ility company here</u> :	
Coleman American of Florida, LLC.		
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" or the abb	reviation "L.L.C."
Enter new principal offices address, if applicable:	<u>_</u> .	
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		

B. If amending the registered agent and/or registered office address on our records, <u>entersue</u>, <u>name of the new</u> registered agent and/or the new registered office address here:

		NON	• •
	<u></u>	1	
	S		
	m cì	3	
Enter Florida street address		_ <u>_</u>	
	$\Box \odot$	7	· • -
Florida	35		•••
City	©:-√Zij	o Bde	
-	, Florida _	Enter Florida street address	Enter Florida street address

#### 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

### ۰ ۰

•

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

#### MGR = 'Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
			🗆 Add
		N	C Remove
		,	Change
		<u> </u>	🗆 Add
			Remove
			Change
<del>_</del>			🖸 Add
			Change
			D Add
		· <u> </u>	Change
		·	D Add
			Change
			🛛 Add
			Remove
			Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

.

.

.

	· •			 	
£					
	···			 	
			-	 	
··. ·			-		
					17 NOV - 1 SECRETARY I
					17 NOV
					> 🛪 🎽
					<u>ــــــــــــــــــــــــــــــــــــ</u>
				 	5*7C
					····
		· · · · · ·			
					×× -
	-			 	<u> </u>
					>

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated _	atiler 30	2017
	F	Cheme.
	<b>~</b>	C. Coleman
	John	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00