

L06000081366

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

AL1

Office Use Only



900079387249

09/06/06--01004--013 **25.00

2006 SEP -6 A 11:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ACROSSMOVING,LLC
(Name of Limited Liability Company)

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

DONALD K. PORGES

(Name of Person)

DONALD K. PORGES CPA, LLC

(Firm/Company)

433 PLAZA REAL SUITE 275

(Address)

BOCA RATON, FL 33432

(City/State and Zip Code)

2006 SEP -6 A 11:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

For further information concerning this matter, please call:

DONALD K. PORGES

(Name of Person)

at (561) 962-4144

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☒ \$25.00 Filing 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)

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

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

ACROSSMOVING, LLC

(Present Name)
(A Florida Limited Liability Company)

FIRST: The Articles of Organization were filed on 08/17/06 and assigned document number L06000081366.

SECOND: This amendment is submitted to amend the following:

MEMBER MANGER CHANGED FROM MICHEL BEDOS TO

AUGUSTO RIBAS

FILED
2006 SEP - 6 A 11:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Dated SEPTEMBER 1, , 2006 .



Signature of a member or authorized representative of a member

DONALD K. PORGES

Typed or printed name of signee

Filing Fee: \$25.00