## L09000 057 694

(Re	questor's Name)	-
(Add	dress)	
(Add	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to I	Filing Officer:	
	s	
	<del>.</del> ,	





700331988657

07/29/19--01022--007 \*\*25.00



## **COVER LETTER**

√w Division of Co	orporations		
SUBJECT:	Carmen J. Soto-Cruz & Assoc	ciates, LLC	
300000	Name of Lin	nited Liability Company	
The enclosed Articles o	f Amendment and fee(s) are sub	omitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	Carmen J. Soto	-Cruz	
		Name of Person	
	Carmen J. Soto-C	Cruz & Associates, LLC	
		Firm/Company	
	14209 Turnin	g Leaf Dr.	
		Address	
	Orlando, Fl 32	2828	
		City/State and Zip Code	<del> </del>
	E-mail address: (	en.dareyoutomove@gmail.com to be used for future annual report notifi	cation)
For further information	concerning this matter, please or		
Carmen J	. Soto-Cruz	407 451- 9962	
Name	of Person	Area Code Daytime	Telephone Number
Enclosed is a check for t	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)
	JNG ADDRESS: ration Section	STREET/COURIE Registration Section	

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

TO:

Registration Section

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

Carmen J. Soto-Cruz & Associates, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization	for this Limited Liability Compa	ny were filed on	06/15/2009	GEGREFARY OF STA TALLAMASSEE FEBR
Florida document number	L09000057694			and the second
This amendment is submitted	I to amend the following:			
A. If amending name, enter	r the new name of the limited li	ability company h	ere:	
Dare You To Move, LL	.C			
The new name must be distinguish	able and contain the words "Limited Lie	ibility Company," the o	designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices	address, if applicable:			
(Principal office address MU	<u> IST BE A STREET ADDRESS)</u>			
Enter new mailing address. (Mailing address MAY BE A		·	3ox 780792 do, FI 32878	
	tered agent and/or registered new registered office address h		n our records, <u>e</u>	nter the name of the new
Name of New Regi	stered Agent:	· · · · · · · · · · · · · · · · · · ·		
New Registered Of	fice Address:			
-		Enter Flo	rida street address	
			, Florid	a
		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 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

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

MGR = Manager AMBR = Authorized Member

<u>Titte</u>	<u>Name</u>	Address	Type of Action
			□ Add
			□ Remove
			Add
		☐ Remove	
			Add
		Remove	
	<del>-</del>	□ Change	
		Remove	
		☐ Change	
		□ Add	
		☐ Remove	
		Change	
		□ Remove	
			Change

	07/00/0040
E. Effec	07/20/2019  tive date, if other than the date of filing:
Note	effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3 If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the ment's effective date on the Department of State's records.
	ecord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: e 90th day after the record is filed.
Dated	Signature of a member or authorized representative of a member
	Carmen J Soto-Cruz  Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00