

# LI1000140394

Florida Department of State  
Division of Corporations  
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To: Division of Corporations  
Fax Number : (850) 617-6383

From: Account Name : THE LAW OFFICES OF NICK SPRADLIN PLLC  
Account Number : I20070000020  
Phone : (813) 435-3176  
Fax Number : (813) 333-6358

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***  
Email Address: \_\_\_\_\_

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2013 OCT 17 AM 8:14

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TALLAHASSEE, FLORIDA

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
COURNAND GLADES, LLC**

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

2013 OCT 17 AM 8:14  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**COURNAND GLADES, 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 Company were filed on 12/14/2011 and assigned  
Florida document number L11000140394.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

**CROSSCOUNTRY MOVING SERVICES, LLC**

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

**Enter new principal offices address, if applicable:**

(Principal office address MUST BE A STREET ADDRESS)

525 RT. 73 NORTH

SUITE 104

MARLTON, NJ

**Enter new mailing address, if applicable:**

(Mailing address MAY BE A POST OFFICE BOX)

525 RT. 73 NORTH

SUITE 104

MARLTON, NJ

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent:

New Registered Office Address:

*Enter Florida street address*

Florida

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.*

If Changing Registered 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>	<u>Address</u>	<u>Type of Action</u>
MGRM	MARIANELLA LEON	18952 N. DALE MABRY HWY	<input type="checkbox"/> Add
		SUITE 102	<input checked="" type="checkbox"/> Remove
		LUTZ FL 33548	
MGRM	JOSHUA B. NEWMAN	525 RT. 73 NORTH	<input checked="" type="checkbox"/> Add
		SUITE 104	<input type="checkbox"/> Remove
		MARLTON, NJ 08053	
MGRM	TIMOTHY A.IGNERI	525 RT. 73 NORTH	<input checked="" type="checkbox"/> Add
		SUITE 104	<input type="checkbox"/> Remove
		MARLTON, NJ 08053	
MGR	JONATHAN SANTIAGO	525 RT. 73 NORTH	<input checked="" type="checkbox"/> Add
		SUITE 104	<input type="checkbox"/> Remove
		MARLTON, NY 08053	
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

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

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Dated 10/17, 2013



Signature of a member or authorized representative of a member

**NICHOLAS J. SPRADLIN, AUTHORIZED REPRESENTATIVE OF A MEMBER**

Typed or printed name of signee

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