# 112000029013

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B. BOSTICK MAR **2 8** 2012

**EXAMINER** 

# SHARMA & ASSOCIATES, INC.

4901 NW 17 Way, Suite 305, Ft. Lauderdale, FL 33309

Office (954) 284-3080 Fax (954) 284-3081

General Accounting ~ Tax Preparation ~ Condo/HOA Accounting ~ Financial Management

March 22, 2012

Florida Department of the State Division of Corporations PO Box 6327 Tallahassee, FL 32314

Re: The Best Move, LLC
Document Number: L12000029013
Articles of Amendment

To Whom It May Concern:

Please find attached Articles of Amendment for The Best Move, LLC. Enclosed is a check for the filing fee of \$25.00.

Contact information is as follows:

Abraham S. Hedaya 19500 Turnberry Way, Apt 7B Aventura, Fl 33180 T/917-763-2068

Sharma & Associates, Inc. 4901 NW 17<sup>th</sup>. Way, Suite 305 Ft Lauderdale, Fl 33309 T/954-284-3080

त्यारी क्यांची है। यू विकास के मार्ट अपट पुरावास्तार प्रतिकार पुरावासिक

Sincerely.

Jo Ann Vallone

Sharma & Associates, Inc.

FILED
12 HAR 26 ANIII: 14
SECRETARY OF STATE

### **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: The Best Move Name of Limited Liab	ility Company
The enclosed Articles of Amendment and fee(s) are submitted for	or filing.
Please return all correspondence concerning this matter to the fo	llowing:
Abraham S	Hedaya.  June of Person
Fi	rm/Company
19500 Turnk	erry Way, Apt 7B
Aventura, F.	L. 33180 AEE 五 Table Ta
CVerbico @ Q E-mail address: (to be use	mail. Com for future annual report notification)
For further information concerning this matter, please call:	for future annual report notification)
Abraham Hedaya Name of Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:	5.00 Filing Fee & \$\int\\$60.00 Filing Fee,
Certificate of Status C	5.00 Filing Fee & Sertified Copy additional copy is enclosed)  Sertified Copy 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**

The Best mo	ve, LLC
( <u>Name of the Limited Liability Compa</u> (A Florida Limited L	ny as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number <u>L1200029013</u>	were filed on $03/39/3012$ and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	ility company here:
The new name must be distinguishable and end with the words "Limi "L.L.C."	ted Liability Company," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	TAL SE
(Principal office address MUST BE A STREET ADDRESS)	AR BOTT
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	26 AH II: 14 SSEE. FLORIDA
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here	
Name of New Registered Agent: Abro	iham S. Hedaya
New Registered Office Address: 1950	Turnberry Way, Apt. 7B  Enter Florida street address
Avento	City, Florida 33180 Zip Code
New Registered Agent's Signature, if changing Registered Agent:	5.1.j

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, Yhereby 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 = Man MGRM = Ma	ager anaging Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
mgr	Hedaya, Abraham I	19500 Turnberry Way #7B Aventura, FL. 33180	Add Remove 
			Add Remove
			Add Remove
D. If amendi	ng any other information, enter change	(s) here: (Attach additional sheets, if necessary.)	FILED 12 HAR 25 AM II: 14
Dated	March 21, 201,	2	
-	Abraham	or authorized representative of a member  He Lay or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00