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2012 JUN 27 AM 8: 15
SECRETARY OF STATE
AND ASSEE, FLORIDA

J. SAULSBERRY EXAMINER

JUL 2 2012

COVER LETTER

SUBJECT: A New Beginning Moving Services, LLC. Name of Limited Libility Company J
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Eitan OFRi Name of Person
A New Beginning Moving Service Un
164 Wimbledon Dr. Address
Plantation FL 33323 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Person at 305-308-33330 Area Code & Daytime Telephone Number 577 37
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\ \text{Certificate of Status} \text{S55.00 Filing Fee & \text{S55.00 Filing Fee & \text{Certificate of Status} & \text{Certificate of Status & \text{Certified Copy (additional copy is enclosed)} \text{Certified Copy (additional copy is enclosed)}

TO:

Registration Section Division of Corporations

> 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

(Name of the Limited Liability Company as it now afficients on our records.)

(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 5 8 2012 and assigned

Florida document number 12 2000 67 37 1

This amendment is submitted to amend the following:

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

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

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

[A Y Wimbledon Dr., Plantabon, Fl 3332Y

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, enter the name of the new

New Registered Agent's Signature, if changing Registered Agent:

registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

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.

City

Enter Florida street address

, Florida

Zip Code

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>	Name	Address	Type of Action			
MGL	IRIS Edri	12321 NW 29th pl Sunase Te 32323	Add			
			Add Remove			
			Add Remove			
			Add Remove			
			Add Remove			
	Control of the Contro		Add Remove			
D. If amend	ling any other information, enter chan	ge(s) here: (Attach additional sheets, if necessar)	SEDIETRRY OF ST			
Dated	L	er or authorized representative of a member				
	Type	od or printed name of signee				

Page 2 of 2

Filing Fee: \$25.00