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Amend

JUN 28 2019 I ALBRITTON

## **COVER LETTER**

		d Moving, LLC		
SUBJECT		Name of Lim	ited Liability Company	
The enclosed	Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return	all correspo	ndence concerning this matter	to the following:	
		Julian Correa		
			Name of Person	
		Knightspeed Moving, LLC		
			Firm/Company	<del></del>
		15051 Royal Oaks Ln #90	6	
			Address	
		North Miami, FL 33181		
City/State and Zip Code				<del></del>
		julian@knightspeedmoving	com to be used for future annual report noti	Gention)
Eve firether in	formation ex	oncerning this matter, please ca	·	neation)
		oncerning this thatter, prease of		
Julian Correa			954 6653690 at () Area Code Daytim	e Telephone Number
	Name of	f Person	Area Code Daytim	e Telephone Number
Enclosed is a	check for th	ne following amount:		
\$25.00 Fi	ling 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)
	MAILI	ING ADDRESS:	STREET/COURI	ER ADDRESS:

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

Registration Section Division of Corporations

TO:

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

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

Knightspeed Moving, 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  $\frac{08/12/2013}{1}$ and assigned Florida document number  $\frac{L13000114998}{}$ 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 contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." 2601 E Jefferson Street ae \_\_\_ Enter new principal offices address, if applicable: Orlando, FL 32803 (Principal office address MUST BE A STREET ADDRESS) 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 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

## 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 = M $AMBR = A$	MGR = Manager AMBR = Authorized Member				
<u>Title</u>	<u>Name</u>	Address	Type of Action		
			Add		
			□ Remove		
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			Change		
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			☐ Change		
			□ Add		
			☐ Remove		
			□ Channa		

Effective date, if other than the date of filing:  (If an 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 605.008.  Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a document's effective date on the Department of State's records.  The 90th day after the record is filed.  Dated  3. 2014  Signature of a member or authorized representative of a member  Julian Corres  Typed or printed name of signee	If amen	ling any other information, enter change(s) here: (Attach additional sheets, if necessary.)
If an 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 605.020  Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a document's effective date on the Department of State's records.  The record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of The 90th day after the record is filed.  Dated  Juvi 3 2014  Signature of a member or authorized representative of a member  Julian Correa	_	
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Dated June 3 2014  Signature of a member or authorized representative of a member  Julian Correa	(If an effect Note: If	ive 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 the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as t
Signature of a member or authorized representative of a member  Julian Correa		
Julian Correa	Dated	June 3. 2014.
Julian Correa		1 den
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Filing Fee: \$25.00