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COVER LETTER

	Registration of	on Section Corporations	
eud iez	****	ARTI ARMAMENTS LLC	
SUBJEC	-1; <u></u>	Name of Li	imited Liability Company
The encl	osed Article	es of Amendment and fee(s) are su	ubmitted for filing.
Please re	eturn all cor	respondence concerning this matte	er to the following:
		JULIYA WEISBROT	
			Name of Person
		MORIARTI ARMAMEI	NTS
			Firm/Company
		7315 NW 46 ST	
			Address
		MIAMI FL 33166	
			City/State and Zip Code
		JW@MORIARTIARMA	MENTS.COM : (to be used for future annual report notification)
For furth	ier informat	ion concerning this matter, please	
JULIYA	WEISBRO)T	646 2480686 at ()
	Ni	ame of Person	Area Code Daytime Telephone Number
Enclosed	l is a check	for the following amount:	
≡ \$25.	.00 Filing Fo	ee S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee, Certified Copy (additional copy is enclosed)
	Division P.O. Box	ion Section of Corporations	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MORIARTI ARMAMENTS LLC

2.2387 - 10 | 201 | 14 | 14

(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 $\frac{10/13/2014}{1}$ and assigned Florida document number L14000159553 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." 7315 NW 46 ST Enter new principal offices address, if applicable: **MIAMI FL 33166** (Principal office address MUST BE A STREET ADDRESS) 7315 NW 46 ST Enter new mailing address, if applicable: MIAMLEL 33166 (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: JULIYA WEISBROT Name of New Registered Agent: 7315 NW 46 ST New Registered Office Address: Enter Florida street address _____, Florida 33166
Zip Code MIAMI 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 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>Title</u>	<u>Name</u>	Address 2008 12 PM 1:	4 Type of Action
MGR	ALEXANDER WEISBROT	8404 NW 66 ST	🗀 Add
		MIAMI FL 33166	≡ Remove
			□ Change
MGR	JULIYA WEISBROT	7315 NW 46 ST	🗖 Add
		MIAMI FL 33166	□Remove
			= Change
			🗆 Add
			□Remove
			🗆 Change
			□Add
			□Remove
			□Change
			🗆 Add
			□Remove
			Change
			□Add
			□Remove
			□Change

	
9.11.20	
ffective date, if other than the date of filing: an effective date is listed, the date must be specific and cannot be prior to date of ote: If the date inserted in this block does not meet the applicable state ocument's effective date on the Department of State's records.	(optional) f filing or more than 90 days after filing.) Pursuant to 605.0207 attory filing requirements, this date will not be listed as the second of the
record specifies a delayed effective date, but not an effective time, at 1 is filed.	2:01 a.m. on the earlier of: (b) The 90th day after the
SEPTEMBER 11 2020	
ated	
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