

L150000 28392

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

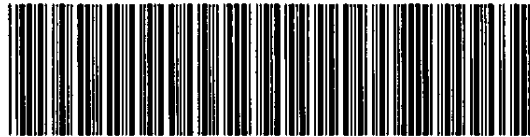
(Business Entity Name)

(Document Number)

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15 MAR -2 PM 3:54  
RECEIVED BY MAIL  
MAR 16 2015

J. G. Myers MAR 16 2015

657



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

March 4, 2015

MAKEVA JENKINS  
1263 S MILITARY TRAIL STE 3  
WEST PALM BEACH, FL 33415

SUBJECT: MAJOR MOVES LLC  
Ref. Number: L15000028392

We have received your document for MAJOR MOVES LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The effective date must be specific and cannot be prior to the date of filing.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Justin M Shivers  
Regulatory Specialist II  
Registration/Qualification Section

Letter Number: 015A00004447

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Major Moves LLC  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Makeva Jenkins

Name of Person

The Prime Enterprise Group

Firm/Company

1263 S. Military Trail, Ste #3

Address

West Palm Beach, FL 33415

City/State and Zip Code

Skennedyakaball@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Makeva Jenkins

Name of Person

at (561) 316-8713

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 Filing 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)

### 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

TO  
ARTICLES OF ORGANIZATION  
OF

Re: Letter #  
015A00004447

Major Moves 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 2/16/2015 and assigned  
Florida document number L15000028392

This amendment is submitted to amend the following:

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

Major Moves Apparel 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)

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

City

Florida

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 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

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Major Moves LLC  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Makeva Jenkins  
Name of Person

The Prime Enterprise Group  
Firm/Company

1263 S. Military Trail, Ste #3  
Address

West Palm Beach, FL 33415  
City/State and Zip Code

MakevaJ@PrimeEnterpriseGroup.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Samuel Kennedy at (561) 506-0639  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- |   |  |  |  |
|---|--|--|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(additional copy is enclosed) |
|---|--|--|--|

paid on 2/16/15. Please attached letter.

**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

**Authorized Member being added or removed from our records:**

**MGR = Manager**

**AMBR = Authorized Member**

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
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_____	_____	_____	<input type="checkbox"/> Add
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		_____	<input type="checkbox"/> Remove
		_____	
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	

E. Effective date, if other than the date of filing: 3-9-15 (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated March 9, 2015.

m p s

Signature of a member or authorized representative of a member

Makeva Jenkins

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

FILED  
15 MAR -2 PM 3:54  
DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA