

6/14/24, 10:25 AM

Division of Corporations

L15000184294
Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet
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To:
Division of Corporations
Fax Number : (850)617-6383

From:
Account Name : LAW OFFICES TONY PORNPORINYA
Account Number : I20010000164
Phone : (305)893-8989
Fax Number : (305)891-7717

24 JUN 14 PM 12:22

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: NVC@Miamiadelaw.net

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
MOSHI MOSHI CORAL WAY LLC

Certificate of Status	0
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Page Count	04
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M. SOLOMON
JUN 14 2024

Electronic Filing Menu Corporate Filing Menu Help

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MOSHI MOSHI CORAL WAY 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:

Tony Pornprinya
Name of Person
Law Office of Tony Pornprinya
Firm/Company
1555 NE 123 Street
Address
North Miami FL 33161
City/State and Zip Code
NVC@Miamiadelaw.net
E-mail address: (to be used for future annual report notification)

26 JUN 14 PM 12:22

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JUN 14 2024

For further information concerning this matter, please call:

Tony Pornprinya at (305) 893-8989
Name of Person 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 Address:
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

MOSHI MOSHI CORAL WAY 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 10/30/2015 and assigned
Florida document number L15000184294

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."

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:

Tony Pornprinya

New Registered Office Address:

1555 NE 123 Street

Enter Florida street address

North Miami

Florida

33161

City

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.

P Pornprinya

If Changing Registered Agent, Signature of New Registered Agent

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

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