116000044734

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	dress)	
(Cil	ty/State/Zip/Phone	e #)
(Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:	MAIL	
(Bu	siness Entity Nan	me)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
		·
		į

Office Use Only



300311419453

04/10/18 -01023 -- 028 **25.00

SECRETARY OF STATE TALLAHASSEE, FLORIDA

N COOPER APR 11 2018

COVER LETTER

то:	Registration Se Division of Con			
SUBJ		NATIONAL SOLUTIONS LL	С	
30 D 3	LC1	Name of Lir	ited Liability Company	
The en	iclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please	return all correspo	ondence concerning this matter	to the following:	
			Name of Person	
			Firm/Company	
			Address	
			City/State and Zip Code	
		E-mail address: (to be used for future annual report notif	ication)
For fur	ther information c	oncerning this matter, please c	all:	
DORG	THY LITTLE		844 295-1031 at ()	
	Name of Limited Liability Company e enclosed Articles of Amendment and fee(s) are submitted for filing. ease return all correspondence concerning this matter to the following: Name of Person Firm/Company Address City/State and Zip Code E-mail address: (to be used for future annual report notification) r further information concerning this matter, please call: DROTHY LITTLE at (
Enclos	ed is a check for the	he following amount:		
\$ 2	5.00 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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MOVING NATIONAL SOLUTION	ONS LLC				
(Name of the Lin	nited Liability Compa (A Florida Limited	nny as it now appears on our Liability Company)	records.)		·
The Articles of Organization for this Limited Florida document number <u>L16000044734</u>	Liability Company	were filed on 03/03/2010	5	and assig	gned
This amendment is submitted to amend the fo	llowing:				
A. If amending name, enter the new name	of the limited liab	ility company here:			
The new name must be distinguishable and contain the Enter new principal offices address, if appli	icable:	lity Company," the designation	on "LLC" or the abbrev	iation "L.L.	.c."
(Principal office address MUST BE A STRE	<u>ET ADDKESS)</u>	1			A
Enter new mailing address, if applicable:		2802 N2 9TH AVE		8 APR 10	CRETAR LLAHAS
(Mailing address MAY BE A POST OFFICE	E <u>BOX)</u>	HOLLYWOOD, FLOR	IDA 33020	- 3	SEE F
B. If amending the registered agent and registered agent and/or the new registered of			ecords, enter the	က္ name o	ORIDE new
Name of New Registered Agent:	DOROTHY, LI	TTLE			
New Registered Office Address:	2802 N 29TH				
		Enter Florida stree	t address		
	HOLLYWOOD)	, Florida 33020		
		City		ip 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

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>	Type of Action
MGR	RAKHMANINOVA, ATIANA	3370 NE 190TH STREET	Add
	·	AVENTURA, FLORIDA 33180	■ Remove
			Change
	150.1		☐ Add
			□ Remove
			☐ Change
			□ Add
			□ Remove
			Change
			□ Add
			☐ Remove
			Change
			□ Add
			□ Remove
			☐ Change
			Remove

			<u> </u>		
			· · · · · · · · · · · · · · · · · · ·		
					ΑL
				APR	LAH
					ASS
· · · · · · · · · · · · · · · · · · ·				3	יין ביני
		·		<u>ن</u>	רכא
				<u> </u>	O P
<u></u>					
	<u></u>				
<u> </u>					
 					
<u> </u>					
·					
Effective date, if other than the date is listed, the date must be Note: If the date inserted in this block document's effective date on the Dep	ate of filing:	or to date of filing or micable statutory filin	(optiona	ng.) Pursuant to 605.02	2(2
ne record specifies a delayed of The 90th day after the recor		oot an effective t	ime, at 12:01 a.m	n. on the earlier	of
DatedAPRIL 5TH	2018	·	,		
		 '			
	/ 4 4 4 /	110			

Page 3 of 3

Filing Fee: \$25.00