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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: DIVING MOVING GINDP 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:
Joseph Marzon
Dime Moving Group, LLC.
7
4235 Hidden Lake Dr.
City/State and Zip Code MCZ 70 Jo C J G J G L LO Com E-mail address: (to be used for luture annual report notification)
100 = 70 1401 Q Value Com
E-mail address: (to be used for futule annual report notification)
For further information concerning this matter, please call;
Described Mazzo at (201) 657-3496 Naple of Person Area Code Daytime Telephone Number
Nație of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
□ \$25.00 Filing Fee □ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee. Certificate of Status Certified Copy (Certificate of Status of Additional copy is enclosed) Certified Copy (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 Gr	Y	، 		
(<u>Name of the Limited Liability</u> (A Florida l					
The Articles of Organization for this Limited Liability Co	impany were filed on $\frac{\mathcal{O}}{\mathcal{O}}$	4/05/2017	, aı	nd assig	med
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limit	ed liability company here	2:			
The new name must be distinguishable and contain the words "Limit	ed Liability Company," the desi	gnation "LLC" or the ab	breviat	ion "L.L.	C."
Enter new principal offices address, if applicable:		<u>. </u>	,	P-3	
(Principal office address MUST BE A STREET ADDRI	<u> </u>		-	=: -@-	1380 E
			· .	<u>~</u>	:
Enter new mailing address, if applicable:				=	<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)				₹.5	
			<u> </u>	P.3	
B. If amending the registered agent and/or registered agent and/or the new registered office address.		our records, <u>enter</u>	the n	iame of	f the new
Name of New Registered Agent:					
New Registered Office Address:	Enter Floride	a street address			
- 1		, Florida		Code	
	Ciņ		Ζip	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, <u>enter the title</u>, <u>name</u>, <u>and address of each person_being added or removed from our records</u>:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
MGIR	Scutt Peach	Address 1632 Woodcrest Dr. Daytana Beach, Fl 30	Add
			☐ Change
			□ Remove
			Change
			🗆 Add
			Remove
		•	Change San
		:	DRemove
		u u	Change
			□ Add
			□ Remove
			🗆 Change
			□ Add
			□ Remove
			D Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
I would like to completely remove
Scott Peach from the managing
members of the company, and the
organization completely.
E. Effective date, if other than the date of filing: (optional) (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 605,0207 (3)(b)
<u>Note:</u> If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
document's effective date on the 12 epartment of state \$ / ecolos.
If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:
(b) The 90th day after the record is filed.
Dated 10/30/17 2017.
Δ
Signature of a member or authorized representative of a member
Joseph Mazzo
Typed outprinted name of signee

Page 3 of 3

Filing Fee: \$25.00