

L17000 106674

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

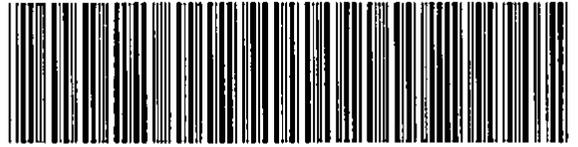
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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05/08/20--01003--030 **25.00

20 MAY -9 PM 3:08

MAY 26 2021
CLERK

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

20 MAY -8 PM 3:00

Modernized Mobile

(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 May 15 2017 and assigned Florida document number 1.17000106674.

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:

747 SW 2nd Avenue

(Principal office address MUST BE A STREET ADDRESS)

Gainesville, Florida 32601

Enter new mailing address, if applicable:

747 SW 2nd Avenue

(Mailing address MAY BE A POST OFFICE BOX)

Gainesville, Florida 32601

B. If amending the registered agent and/or registered office address on our records, enter the name of the new register agent and/or the new registered office address here:

Name of New Registered Agent:

Nahu Alula

New Registered Office Address:

747 SW 2nd Avenue

Enter Florida street address

Gainesville

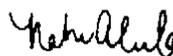
Florida 32601

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.



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>	<u>Type of Action</u>
CEO	Nahu	840 NW 20th Street	<input type="checkbox"/> Add
		Gainesville, FL 32603	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
CBDO	Marlana Armstrong	3461 SW 2nd Ave Apt 447	<input checked="" type="checkbox"/> Add
		Gainesville, FL 32607	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AR	Nitharsan Sivakanthan	1320 NW 3rd Ave Apt 254	<input type="checkbox"/> Add
		Gainesville, FL 32603	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AR	Arpan Parekh	15419 Lake Bella Vista Drive	<input type="checkbox"/> Add
		Tampa, FL 33625	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AR	Sarvar Nasirov	321 SW 12th Street	<input type="checkbox"/> Add
		Gainesville, FL 32601	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

