



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

. Account Name

: LANCE A, RAGLAND, P.A.

Account Number : 120150000054

Phone Fax Number : (407)542-0633 : (407)366-8149

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

ELLC AMND/RESTATE/CORRECT OR M/MG RESIGN PINK MOVING AND STORAGE, LLC

Certificate of Status	0
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Page Count	04
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## **COVER LETTER**

	MOVING AND STORAGE, LLC		
SUBJECT:	Name of Lin	nited Liability Company	
The evoluted Action	ee of Amandment and feets) are sub	omitted for filling	
		•	
Please return all cor.	respondence concerning this matter	to rue tottomnfi;	
	Lionel Colon		
PINK MOVING AND STORAGE, LLC    Name of Limited Liability Company			
	Florida Lucky Moving, Li	LC.	
		Firm/Company	
	641 Kissimmee Place		
		Address	
	Winter Springs, Plorida 32	2746	
	<u> </u>		fication)
For further informat		•	,
Lionel Colon		321 274-6853	
Na Na	aino of Person	Area Code Daytim	е Тејерћоле Митбет
Enclosed is a check	for the following amount:		
\$25.00 Filling Fe		Certified Copy	Certificate of Status & Certified Copy
Re Di P.	gistration Section vision of Corporations O. Box 6327	Registration Section Division of Corpor Clifton Building	n alions nter Circle

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PINK MOVING AND STORAGE			
(Name of the Lim	ited Liability Company as it now appear (A Florida Limited Liability Company)	rs on our records.)	
The Articles of Organization for this Limited I	Liability Company were filed on De	ecember 18, 2017	and assigned
Florida document number L17000257227			
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name	of the limited liability company be	ere:	
FLORIDA LUCKY MOVING, LLC			- <b>-</b>
The new name must be distinguishable and contain the	words "Limited Liability Company," the d	lesignation "LLC" or the ab	breviation "L.L.C."
Enter new principal offices address, if appli	cable:		
(Principal office address MUST BE A STRE	<u>ET ADDRESS)</u>		50
			က
Enter new mailing address, if applicable:	-		<u></u>
(Mailing address MAY BE A POST OFFICE	<u> </u>		
B. If amending the registered agent and registered agent and/or the new registered of	•	our records, enter	the name of the new
Name of New Registered Agent:	LIONBL COLON		
New Registered Office Address:	641 Kissimmee Place		
	Emer Flor	ida street oddress	
	Winter Springs	, Florida _ <sup>32′</sup>	
	Ctt)	·	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.

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 Type of Action <u>Address</u> Name Title MAMI OUAZZANI 212 VIA TUSCANY LOOP MOR ☐ Add LAKE MARY, FLORIDA 32746 Remove \_□ Change LIONEL COLON 641 KISSIMMEE PLACE MGR **■** Add WINTER SPRINGS, FL 32708 \_D Roppove \_\_\_ Change. □ Add ☐ Remove Change □ Add □ Remove bbA 🖳 □ Remove □ Remove

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