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Office Use Only



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#### **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: Premier Movers Florida 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:
Bondaren Ro Olga Name of Person
Premier Movers Florida LLC Firm/Company
1025 F Hollandole Beach Address
Hallandole, FL, 33009 City/State and Zip Code
Premiermovers (Co Amail. Com E-mail address. (to be used for future annual report notification)
For further information concerning this matter, please call:
White Sebostian at (754) 226 8072  Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee Certificate of Status  Certificate of Status  Certified Copy (additional copy is enclosed)  \$60.00 Filing Fee, Certified Copy (additional copy is enclosed)  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

Premier Movers El	bride 110	
(Name of the Limited Liability Compar (A Florida Limited L	ny as it now appears on our records.)	
· ··	·	
The Articles of Organization for this Limited Liability Company	were filed on <u>03/27/18</u>	and assigned
Florida document number <u>L 160000 78 587</u>		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabil	lity company here:	
The new name must be distinguishable and contain the words "Limited Liabilia"	ty Company," the designation "LLC" or the abl	previation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)	· <del></del>	
,		
Enter new mailing address if applicables		
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)		· · · · · · · · · · · · · · · · · · ·
(Mutang duaress MAT BE ATOST OFFICE BOX)		
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here:		the name of the new
registered agent and/or the new registered office address here.	•	
Name of New Registered Agent:		CHAH
New Registered Office Address:		ASS ASS
New Registered Office Address.	Enter Florida street address	F-0-1
	, Florida	Es E M
	City	#IrCode
New Registered Agent's Signature, if changing Registered Agent:		^= <b>∧</b> e

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>	Name	Address	Type of Action
MGR	Olgo Bondorenko	1025 F. Hallandole Beach	🗆 Add
	;	Hallandole Beach	Nemove
			Change
<u>M6R</u>	White Sebastian	1025 F. Hallandole Beach	Add
	•	Hollandale Fl 33009	□ Remove
		· · · · · · · · · · · · · · · · · · ·	Change
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			Change

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Signature of a member or authorized representative of a member		15.07.1	8	· <del>-/)</del>	<del>/</del> ·				
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Page 3 of 3

Filing Fee: \$25.00