## 18000202560

| (Re                     | questor's Name)   |           |
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| PICK-UP                 | ☐ WAIT            | MAIL      |
| (Bu                     | siness Entity Nam | e)        |
| (Do                     | ocument Number)   | _         |
| Certified Copies        | _ Certificates    | of Status |
| Special Instructions to | Filing Officer:   |           |
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## **COVER LETTER**

| TO: Registration Section Division of Corporations   |  |
|---|--|
| SUBJECT: WE ON THE MOVE 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:   |  |
| CARlos E. Rodriguez Figueroa  |  |
| WE ON THE MOVE LLC Firm/Company   |  |
| 3030 Harkers Island way &   |  |
| Kissimmee Fl 34744 City/State and Zip Code  |  |
| bad booy 2383 @ yakoo. com  E-mail address: (to be used for future annual report notification)  |  |
| For further information concerning this matter, please call:  |  |
| Chrlos F Rodriguez at (407) 861-2059  Name of Person Area Code Daytime Telephone Number   |  |
| Enclosed is a check for the following amount:   |  |
| S25.00 Filing Fee S30.00 Filing Fee & S55.00 Filing Fee & S60.00 Filing Fee, Certificate of Status 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

| (Name of the Limited Liability Co  | MOVE UC  Description of the second of the se |                            |
|--|--|----------------------------|
| The Articles of Organization for this Limited Liability Comp. Florida document number $\frac{19000202560}{}$ . | pany were filed on 8-23-18   | and assigned               |
| 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 I  | 11175 (C   |                            |
| The new name must be distinguishable and contain the words "Limited I  | Liability Company, the designation LLC or the apprevi  | ation TIC.                 |
| Enter new principal offices address, if applicable:  |  | <u>8</u> <u>8</u> <u>8</u> |
| (Principal office address MUST BE A STREET ADDRESS   | <u> </u>   | <u> </u>                   |
|  |  | <u>&gt;</u> 워크-            |
|  |  | 57<br>2016<br>2016         |
| Enter new mailing address, if applicable:  |  | = ::                       |
| (Mailing address MAY BE A POST OFFICE BOX)   |  |                            |
|  |  |                            |
| B. If amending the registered agent and/or registere registered agent and/or the new registered office address |  | name of the new            |
| Name of New Registered Agent:  |  |                            |
| New Registered Office Address:   |  |                            |
|  | Enter Florida street address   |                            |
| - <del></del>  | , Florida  |                            |
|  | 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, <u>enter the title, name, and address of each person\_being added or removed from our records</u>:

MGR = Manager

| AMBR = Au    | thorized Member    |   |                   |
|--------------|--------------------|---|-------------------|
| <u>Title</u> | <u>Name</u>        | Address                                       | Type of Action    |
| Mar          | Madeline Rosa      | 3030 Harkers Island Way<br>Kissimmee FL 34744 | <b>\</b><br>□ Add |
|              |                    |   | B Remove          |
|              |                    | 3030 Harlers Island 1<br>161551 mmee FL 34746 | □ Change          |
| MGR          | Carlos E Rodriguer | Kissimmee FL 34746                            | Ndd               |
|              | Figueroa           |   | Remove            |
|              |                    |   | Change            |
|              |                    | ***   | 🗆 Add             |
|              |                    |   | □ Remove          |
|              |                    |   | Change            |
|              |                    |   | □ Add             |
|              |                    |   | Remove            |
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|                                 |   |                                      |                                     |                     | <u>.</u>          |   |              |                      |
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| reffective dat<br>te: If the da | , if other than the e is listed, the date muste inserted in this blective date on the D | it be specific and<br>ock does not m | cannot be prior<br>sect the applica | to date of filing c | r more than 90 da | (optional)<br>ys after filing.) Po<br>its, this date wi | ursuant to   | 605.020<br>listed a: |
|                                 | ecifies a delayed<br>lay after the rec  |                                      | ate, but no                         | t an effectiv       | e time, at 12     | 2:01 a.m. on  | the ea       | irlier o             |
| 6                               | 20-18   | 3/1                                  | 11.34 a                             | <u>~</u> .          |                   |   |              |                      |
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Filing Fee: \$25.00