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COVER LETTER

Divis	sion of Corp	porations		
	WE OUR U	S MOVERS, LLC		
SUDJECT		Name of Lim	ited Liability Company	
The analogad	Amialar of	Amandment and fac(s) are sub-	mitted for filing	
The enclosed	Atticles of A	Amendment and rec(s) are sub	initied for fining.	
Please return a	all correspo	ndence concerning this matter	to the following:	
		Rushane Kelly		
			Name of Person	
		Name of Limited Liability Company cles of Amendment and fee(s) are submitted for filing. orrespondence concerning this matter to the following: Rushane Kelly Name of Person RTK Moving, L.I.C Firm/Company 25 Roxbury Court Unit 2E Address Keene, NH 03431 City/State and Zip Code rtk@rtkmoving.com E-mail address: (to be used for future annual report notification) nation concerning this matter, please call: Name of Person Area Code Daytime Telephone Number		
			Firm/Company	
		25 Roxbury Court Unit 2E		
		<u></u>	Address	
		Keene, NH 03431		
	WE OUR US MOVERS. LLC Name of Limited Liability Company e enclosed Articles of Amendment and fee(s) are submitted for filing. Passe return all correspondence concerning this matter to the following: Rushane Kelly Name of Person RTK Moving. LLC Firm/Company 25 Roxbury Court Unit 2E Address Keene, NH 03431 City/State and Zip Code rtk@rtkmoving.com E-mail address: (to be used for future annual report notification) r further information concerning this matter, please call: shane Kelly Name of Person Area Code Daytime Telephone Number closed is a check for the following amount: \$25.00 Filing Fee Certificate of Status Certificate Copy (additional copy is enclosed) Certificate Copy Certificate Copy Certificate Copy			
	ME OUR US MOVERS. LLC Name of Limited Liability Company d Articles of Amendment and fee(s) are submitted for filing. n all correspondence concerning this matter to the following: Rushane Kelly Name of Person RTK Moving, LLC Firm/Company 25 Roxbury Court Unit 2E Address Keene, NH 03431 City/State and Zip Code rtk@rtkmoving.com E-mail address: (to be used for future annual report notification) Information concerning this matter, please call: Ally Name of Person Area Code Daytime Telephone Number a check for the following amount: Filing Fee Certificate of Status Certificate of Status & Certified Copy (additional copy is enclosed)			
For further in	formation co	oncerning this matter, please ca	all:	
Rushane Kell	•		at ()	
	Name of	Person	Area Code Daytime	Telephone Number
Enclosed is a	check for th	e following amount:		
■ \$25.00 Fi	ling Fee	-	Certified Copy	Certificate of Status & Certified Copy

Registration Section

TO:

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

TOARTICLES OF ORGANIZATION

T	υ	
ARTICLES OF C	PRGANIZATION	
O	F	10/0
WE OUR US MOVERS, LLC		
(Name of the Limited Liability Compa (A Florida Limited)	ny as it now appears on our records.) Diability Company)	10 PH 3:14
The Articles of Organization for this Limited Liability Company	were filed on 2018	and assigned
Florida document number L.19000010817		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
DANIELS MOVING & STORAGE, LLC		
he new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the	ne abbreviation "L.L.C."
Enter new principal offices address, if applicable:	25 Roxbury Court	
Principal office address MUST BE A STREET ADDRESS)	Unit 2E	
THE SPIN OFFICE WANTED THE STATE OF THE SPIN OF THE SP	Keene, NH 03431	 -
		
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
raming undiversity in the rest of the rest		
		
3. If amending the registered agent and/or registered of	fice address on our records, en	ter the name of the new
registered agent and/or the new registered office address her		
Name of New Registered Agent:		
New Project of Control Address		
New Registered Office Address:	Enter Florida street address	
	F31 . 1	
	, Florida	7 in 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

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MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
AMBR	Rushane Kelly	25 Roxbury Court, Unit 2E Keene, NH 03431	■ Add
			☐ Remove
MGR	Karl August	2613 34th Ave East Bradenton, FL 34208	■ Add
			□ Remove
			Change
			Add
			Remove
			☐ Change
			Add
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tote: If the date inserted in this	nust be specific and cannot be prior to o	(optional) date of filing or more than 90 days after filing.) Pute statutory filing requirements, this date will	rsuant to 605.0207 (I not be listed as t
e record specifies a delay The 90th day after the r		n effective time, at 12:01 a.m. on	the earlier of:
August 28	2019		
			
	Signature of afmember or authorize	ed representative of a member	

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00