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(Re	questor's Name)	
(Ade	dress)	<u> </u>
(Add	dress)	
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	ICA-L-FILL IDL	
(Cir	y/State/Zip/Phone	∋ #)
PICK-UP	☐ WAIT	MAIL
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(DO	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to I		
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Office Use Only



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COVER LETTER

TO:	Registration Sec Division of Corp				
CHIES TE	Anthem Am	nerica LLC			
SUBJECT: Name of Limited Liability Company					
		Amendment and fee(s) are sub ndence concerning this matter			
ricase	retuin an correspo	Donna Cochran	to me tonowing.		
		Anthem America LLC	Name of Person		
		777 S Flagler Dr #800	Firm/Company		
		West Palm Beach, Fl. 3340	Address H		
		info@aanthemmovingservi			
For fur	ther information c	E-mail address: (oncerning this matter, please c	to be used for future annual report noti- all:	fication)	
donna	cochran		786 292-8620		
	Name o	f Person	at () Area Code Daytim	e Telephone Number	
Enclos	ed is a check for th	ne following amount:			
□ \$2	5.00 Filing Fee	■ \$30,00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	

MAILING ADDRESS:

TO:

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

Anthem America LLC		
(Name of the Limited Liability Comp (A Florida Limited	pany as it now appears on our records.) (Liability Company)	
he Articles of Organization for this Limited Liability Compan	y were filed on <u>02/01/2019</u>	and assigned
lorida document number L19000026191		
his amendment is submitted to amend the following:		
. If amending name, enter the new name of the limited lia	bility company here:	
nthem Moving LLC		
he new name must be distinguishable and contain the words "Limited Liab	pility Company," the designation "LLC" o	or the aboreviation L.C."
nter new principal offices address, if applicable:		-
Principal office address MUST BE A STREET ADDRESS)		- 17 · 17 · 17 · 17 · 17 · 17 · 17 · 17
		- 10 ES
nter new mailing address, if applicable:		6: I
Aailing address MAY BE A POST OFFICE BOX)		365
. If amending the registered agent and/or registered gistered agent and/or the new registered office address he		enter the name of the r
Name of New Registered Agent:		
New Registered Office Address:	Coton Classifications of Decem-	
	Enter Florida street address	
	, Flor	
	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 = A	Authorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Remove
			Add
			Remove
			Change
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ffective date, if other than the d an effective date is listed, the date must b	ate of filing:		(optional)	
an effective date is listed, the date must be state. If the date inserted in this bloc	e specific and cannot be price. k does not meet the appli	or to date of filing or mot icable statutory filing	re than 90 days after filing.) Pursuant to requirements, this date will not be	605.0207 Tisted as
ocument's effective date on the Dep			requirements, this date with hor be	mated as
e record specifies a delayed e	offective date, but n	ot an effective ti	ma at 10:01 a.m. on the e:	arlier of
The 90th day after the recor		ot an enceive in	inc, at 12.01 a.m. on the ce	211101 01
	2019			
February 04				
Pated February 04		 '		
Dated February 04	·	·		
Dated February 04	? /42	horized consequents	fo mambur	_
Pated February 04	? /42	horized representative o	t a member	-

Page 3 of 3

Filing Fee: \$25.00