## 119000034182

(Req	uestor's Name)	
lbbA)	ress)	<u></u>
(Adda	ress)	
(City/	State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Busi	ness Entity Nam	ne)
(Docu	ument Number)	
Certified Copies	Certificates	of Status
Special Instructions to Fi	ling Officer:	

Office Use Only



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07/30/19--01036--003 \*\*30.00

05/09/13--01010--005 \*\*35.00





May 20, 2019

BRITTANY GALLI 306 NE 1 AVE #109 BOYNTON BEACH, FL 33435

SUBJECT: MOBOTOUR, LLC Ref. Number: L19000034182

We have received your document for MOBOTOUR, LLC and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

This is a LLC the document you sent in is for a Corporation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Tracy L Lemieux Regulatory Specialist II

Letter Number: 019A00010185

Of the same of the

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

FILED

MOBOTOUR, LLC	THE BE OC A PROPERTY.
(Name of the Limited Liability Come (A Florida Limited	pany as it now appears on our receipts.
The Articles of Organization for this Limited Liability Compar Florida document number L19000034182	SEUREJARY UF STAIR
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited lia	bility company here:
The new name must be distinguishable and contain the words "Limited Lial	bility Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)  B. If amending the registered agent and/or registered	office address on our records, enter the name of the new
registered agent and/or the new registered office address he	<u>re</u> :
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	, Florida
	•
New Registered Agent's Signature, if changing Registered Agent	<u>u</u>
I hereby accept the appointment as registered agent and ag	ree 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>	<u>Name</u>	<u>Address</u>	Type of Action
CEO	DUSTIN LAUN	306 NE 1ST AVE, #109 BOYNTON BEACH, FL 33435	D Add
			☐ Remove
			_ ■ Change
CSO BRITTANY GALLI	BRITTANY GAŁLI	306 NE 1ST AVE, #109 BOYNTON BEACH, FL 33435	
			Remove
			■ Change
CRO JON MITCHELL	JON MITCHELL	306 NE 1ST AVE, #109 BOYNTON BEACH, FL 33435	Add
			☐ Remove
			Change
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If an effe <u>Note:</u> 1	te date, if other than the date of filing:
ne reco	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of 00th day after the record is filed.
	7/1/19
Dated _	
Dated _	B. Gala
Dated _	Signature of a member or authorized representative of a member  Battan Galli

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Filing Fee: \$25.00