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#### **COVER LETTER**

то:	Registration Se Division of Cor			
SUBJE	Sebastian !	Moving Pensacola LLC		
., ., .		Name of Lin	nited Liability Company	
The end	closed Articles of	Amendment and fee(s) are sub	omitted for filing,	
Please	return all correspo	ondence concerning this matter	to the following:	
		Jamin Sebastian		
			Name of Person	
		Sebastian Moving Pensaco	ola LLC	
			Firm/Company	
		2228 Majestic Woods Blv	d	
		<del></del>	Address	<u> </u>
		Apopka, FL 32712		
		info@sebastianmoving.net	City/State and Zip Code	
		E-mail address: (	to be used for future annual report noti	fication)
For furt	her information c	oncerning this matter, please co	all:	
Jamin S	Sebastian		at () 466-6455 Area Code Daytim	
	Name o	f Person	Area Code Daytim	e Telephone Number
Enclose	d is a check for th	e following amount:		
<b>■ \$</b> 25	.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:

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

Sebastian Moving Pensacola LLC				
(Name of the Limit	ted Liability Compa (A Florida Limited)	i <mark>ny as it now appears on ou</mark> Liability Company)	records.)	<del></del>
The Articles of Organization for this Limited L. lorida document number	iability Company	were filed on 03/06/201	9	and assigned
his amendment is submitted to amend the foll-	owing:			
a. If amending name, enter the new name o	f the limited liab	ility company here:		
he new name must be distinguishable and contain the w	vords "Limited Liabi	lity Company," the designation	in "LLC" or the abbre	eviation "L.L.C."
Enter new principal offices address, if applicable:		4712 W. Fairfield Dr A	pt 4F	
Principal office address MUST BE A STREET ADDRESS)		Pensacola, FL 32506		
			<del></del>	
		2228 Majestic Woods E	Nyd	
Enter new mailing address, if applicable:  Mailing address MAY BE A POST OFFICE BOX)		Apopka, FL 32712		
James Cos Mill DE 711 OG 1 OF X 1CD	<u>bory</u>			
		-	<del></del>	13.00
B. If amending the registered agent and/			ecords, enter th	e name of the no
egistered agent and/or the new registered of	nice aduress ner	<b>E:</b>		1 5
Name of New Registered Agent:	Marcus Griffin			- 10 PH 3
New Registered Office Address:	4712 W. Fairfie	eld Dr. Apt 4F		
		Enter Florida stree	! address	
	Pensacola		, Florida <u>3250</u>	6
		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.

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
MGR	Charles Noble	2402 W Blount ST	
		Pensacola, FI. 32505	
			Remove
			□ Change
MGR	Marcus Griffin	4712 W Fairfield Dr Apt 4F	
		Pensacola, FL 32506	Add
			□ Remove
			Change
		-	Add
		<del></del>	Remove
			Change
			☐ Remove
		<del></del>	Change
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			☐ Remove
		<del></del>	☐ Change
		<del></del>	□ Add
			Remove
			Change

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			10/05/2019				
1.0tc1	e date, if other that tive date is listed, the da I the date inserted in t at's effective date on	ms block does not m	cannot be prior to eet the applicab	date of filing or mode statutory filing	(option re than 90 days after fil requirements, this d	al) ing.) Pursuant to 605,0207 ate will not be listed as	(3)(h the
If the reco (b) The 9	rd specifies a del Oth day after the	ayed effective do	ate, but not	an effective ti	me, at 12:01 a.n	n. on the earlier of	:
Dated O	etober 8th	_	2019				
	082			•			
		Signature of a m	ember or authori	zed representative o	of a member		
	Jamin Sebastian						

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00