

A14 000 155 220

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☒

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

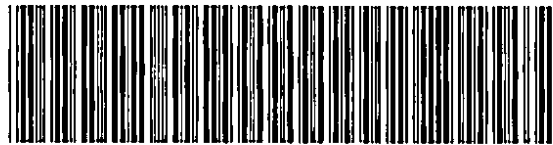
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2020 MAR 30 AM 10:23

C GOLDEN

MAR 31 2020

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT:

United Moving Company 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:

Tiffany Selnick
Name of Person

United Moving Company LLC
Firm/Company

500 Fairway Dr. #106
Address

Deerfield Beach FL 33441
City/State and Zip Code

info@unitedmovingco.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Dustin Ropp
Name of Person

at ()
Area Code

888-298-3718
Daytime Telephone Number

Enclosed is a check for the following amount:

- ☒ \$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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303



FLORIDA DEPARTMENT OF STATE
Division of Corporations

2020 MAR 30 AM 11:15

March 14, 2020

TIFFANY SELNICK
500 FAIRWAY DRIVE #106
DEERFIELD BEACH, FL 33441

SUBJECT: UNITED MOVING COMPANY LLC
Ref. Number: L19000185220

We have received your document and check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

If you are changing the registered agent, please enter the new name and address; you can list only one (1) registered agent for the company. The individual listed and the person signing must be the same.

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.

Claretha Golden
Regulatory Specialist II

Letter Number: 920A00005684

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2025 MAR 30 AM 10:23

(A Florida Limited Liability Company)

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>	<u>Type of Action</u>
MGR	Dustin Rapp	500 Fairway Dr #106	<input checked="" type="checkbox"/> Add
		Deerfield Beach FL 33441	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Tiffany Selnick	11995 Federal Hwy #118	<input type="checkbox"/> Add
		Boxcaton FL 33532	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

[illegible]

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated 2/21/20 _____

Signature of a member or authorized representative of a member

Typed or printed name of signee