L19000 199 758

(Requestor's Name)
(Address)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
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(Document Number)
Certified Copies Certificates of Status
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Special Instructions to Filing Officer:





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Name Change

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COVER LETTER

TO: Registration Sec Division of Corp					
SUBJECT: Next	Destination Mo	oving Services, LLC	<u> </u>		
The enclosed Articles of A	mendment and fee(s) are sub	mitted for filing.			
Please return all correspon	dence concerning this matter	to the following:			
		ine Laird Name of Person			
	Next Desti	nation Moving Ser	vices LLC		
	41 Circle	Dr. Address			-
	Holly Hill	FL 32117 City/State and Zip Code		19 AUG 19	1000 1000 1000 1000 1000 1000
	<u>next destina</u> E-mail address: (i	tion ins og mail. co	Cation)	ુ PH	
For further information cor	ncerning this matter, please ca	dl:		- - 2: 3	NTS.
Jermaine Name of 1	Laird	at (863) 557 Area Code Daytime	- 3953 Telephone Number	Ö	ONO E
Enclosed is a check for the	following amount:				
□ \$25.00 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

٠, ٣, ٠

Next Destinat	Tion Moving Senability Company as it now appears of forda Limited Liability Company)	ruices, LLC &
The Articles of Organization for this Limited Liabil Florida document number 190019979	ity Company were filed on <u>Au</u> 5 <u>8</u> .	1945+ 6,2019 and assisted
This amendment is submitted to amend the following	ng:	, , , , , , , , , , , , , , , , , , ,
A. If amending name, enter the new name of the Next Destination Mov. The new name must be distinguishable and contain the words		
Enter new principal offices address, if applicable		
(Principal office address MUST BE A STREET A.	DDRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	<u></u>	
B. If amending the registered agent and/or r registered agent and/or the new registered office	registered office address on ou address here:	ur records, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida	street address
_		, Florida
	Ciţy	Zıp 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 = Authorized Member

<u>Title</u>	Name	Address	Type of Action
			☐ Remove
			Change
			□ Add
			Remove
			Change
			□ Remove
			□ Change
			Add
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			□ Change
			Add
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			☐ Change
			□ Add
			□ Remove
			Change

i. njame	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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(II an effe Note: 1	ce date, if other than the date of filing:
the reco	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 90th day after the record is filed.
Dated_	August 16. 2019 Denne Rud Signature of a member or authorized representative of a member
	Denne Rid
	Signature of a member or authorized representative of a member
	Jermaine Laird
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00