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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name: REGISTERED AGENTS INC.

CONTENED MOCHING

Account Number : I20090000081

Phone : (307)200-2803

Fax Number : (855)330-1010

RIVERTE

SEP 1 5 2020

""Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. ""

Email Address:		
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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

MOIZT LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

BH: THE THE TE

Help

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

20-20

Moizt LLC	
(<u>Name of the Limited Liability Compa</u> (A Florida Limited I	ny as it now appears on our records.) Liability Company)
ne Articles of Organization for this Limited Liability Company orida document number L19000282810	were filed on 11/13/2019 and assigned
nis amendment is submitted to amend the following:	
. If amending name, enter the new name of the limited liab	ility company here:
ne new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" or the abbreviation "L.L.C."
nter new principal offices address, if applicable:	501 NE 31st ST unit 608
Principal office address MUST BE A STREET ADDRESS)	Miami Florida 33137
nter new mailing address, if applicable:	501 NE 31st ST unit 608
Mailing address MAY BE A POST OFFICE BOX)	Miami Florida 33137
. If amending the registered agent and/or registered of egistered agent and/or the new registered office address here. Name of New Registered Agent:	
Name of New Registered Agent.	
New Registered Office Address:	Enter Florida street address
,	, Florida
ew 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>	<u>Name</u>	Address	Type of Action
AMBR	COLINA BARAZARTE, CARLOS	501 NE 31st ST	
		unit 608	□ Remove
		Miami, Florida US 33137	☑ Change
			🗖 Add
			□ Remove
			Change
	· · · · · · · · · · · · · · · · · · ·	··	□ Add
			Remove
			Change
		·····	□ Add
			☐ Remove
			☐ Change
			□ Remove
			Change
			Remove
			□ Change

D. If am	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
(If an ef <u>Note:</u>	tive date, if other than the date of filing:
	cord 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 26 2020
	Signature of a member or authorized representative of a member
	Morgan Noble
	Typed or printed name of signee

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Filing Fee: \$25.00