## LZO 00000 2340

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Bu	isiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



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O SIMMONS FEB 22 2021



February 4, 2021

RASHEED POWELL 3031 NW 17TH ST FT LAUDERDALE, FL 33311

SUBJECT: FOREVA LLC Ref. Number: L20000002340

We have received your document for FOREVA LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

The document number of the name conflict is P05000015525.

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.

Letter Number: 121A00002530

Octavia L Simmons
Regulatory Specialist II Supervisor

www.sunbiz.org

## **COVER LETTER**

Registration Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

TO:

SUBJECT:	FOREVA	LLC	
	Name of Limite	d Liability Company	
	mendment and fee(s) are submi	_	
·	-	-	
	hasheed	POWELL Name of Person	
	FURE	A LLC Firm/Company	
	3031 NW	17th St Address	
		dale FL 3331 City/State and Zip Code	
	E-mail address: (to	be used for future annual report notification	)
For further information con	cerning this matter, please call	:	
husneed Name of P	Powell erson	at (954) 470 310 Area Code Daytime Telepl	none Number
Enclosed is a check for the	following amount:		
□ \$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address: Registration Seconds of Cor		Street Address: Registration Section Division of Corporati	ons

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

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

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FOREVA 1	LC 2021 FEB 19 PM 2:54
(Name of the Limited Liability Comp (A Florida Limited	Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number <u>4200002340</u> .	y were filed on $\frac{13/30/3019}{13/30}$ and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited lial	bility company here:
MONEYUNE CONN	
The new name must be distinguishable and contain the words "Limited Liab	ility Company," the designation "L.L.C." or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:  (Principal office address MUST BE A STREET ADDRESS)	3031 NW 17th St Fort Lauderdake FL 33311
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)	3031 NW 17th ST Fortlanderdale FL 33311
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, enter the name of the new registered
Name of New Registered Agent:	hasheed Powell
New Registered Office Address: 3031 N	MITH ST  Enter Florida street address
FOR+ Lau	Aderdale Florida 33311 City Zip Code
New Registered Agent's Signature, if changing Registered Agent	,

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 veing filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability ompany 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 = M AMBR = A	anager uthorized Member		FILED
Title	<u>Name</u>	Address	2021 FEB   Type 652 origin
AMBR	hasheed Powell	3031 NW 17th	
		Fort Landerdal	
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ive date, if other than the date of filing:	be prior to date of filing or more than 90 days after filing.) Pursuant to 6
If the date inserted in this block does not meet the nent's effective date on the Department of State's r	e applicable statutory filing requirements, this date will not be l
·	
d specifies a delayed effective date, but not an effe led.	ective time, at 12:01 a.m. on the earlier of: (b) The 90th day at
0	
December 15 .20	20
DILETTON, JC	
A	or authorized representative of a member