• •		
LLCCCC	BOBAI	
(Requestor's Name) (Address)	200342778	3122
(Address) (City/State/Zip/Phone #)		
PICK-UP WAIT MAIL (Business Entity Name)	94/01/3001919-	001 ++25.00
(Document Number)		
Certified Copies Certificates of Status		CILLED
Office Use Only	۲ .SI JI KE APR 1 4 2020	Ŗ

,	(COVER LETTER	ll K
TO: Registration Se Division of Cor			
	OORS COMPANY LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	KEN AGRAVANTE		
		Name of Person	
	MOBIUS INVESTMENT	S LLC	
		Firm/Company	
	6321 NW 175TH TERRA	CE	
		Address	
	HIALEAH/FLORIDA, 33	015	
		City/State and Zip Code	
	KEN@FRONTDOORSCO	MPANY.COM to be used for future annual report no	tification
· For further information e	oncerning this matter, please ca		
KEN AGRAVANTE		786 5465569	ſ
Name o	f Person	at () Area Code Dayti	me Telephone Number
Enclosed is a check for th	ne following amount:		
■ \$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed
Mailing Addres Registration 9		<u>Street Address:</u> Registration S	ection
Division of C	orporations	Division of Co	orporations
P.O. Box 632	.7	The Centre of	Tallahassee

Tallahassee, FL 32314

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

· .	TICLES OF AMENDM TO ICLES OF ORGANIZA		
	OF		
FRONT DOORS COMPANY LLO			
(Name of the Limi	ted Liability Company as it now app (A Florida Limited Liability Company	ears on our records.)	
The Articles of Organization for this Limited L		1	and assigned
Florida document number 120000080891	 ·		
This amendment is submitted to amend the foll	owing:		
A. If amending name, <u>enter the new name o</u>	f the limited liability company	<u>here</u> :	
The new name must be distinguishable and contain the v	vords "Limited Liability Company." th	e designation "LLC" or the abbrev	iation "L.L.C."
Enter new principal offices address, if applie	cable:		
(Principal office address MUST BE A STREE	ET ADDRESS)		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE	BOX)	TAL S	2020
·	<u></u>		APR
B. If amending the registered agent and/or p	registered office address on ou	r records, <u>enter the name of</u>	the new registered
agent and/or the new registered office addre	ss here:		
		ن ب <u>ب</u>	
Name of New Registered Agent:	Mobius Investments LLC		<u> </u>
New Registered Office Address:	6321 NW 175TH TERRACE		
	Enter F	Florida street address	1
	HIALEAH	Florida <u>33015</u>	
	City	Z	Code
New Registered Agent's Signature, if changing	Registered Agent:		1

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.

Anton

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If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person being added</u> or removed from our records:

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MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	DEAN LAWRENCE	6207 NW 190TH TERRACE HIALEH, FL 33015	Add
		<u> </u>	<u>J</u> ≣Remove
			🗆 Change
MGR	KEN AGRAVANTE	6321 NW 175TH TERRACE HIALEAH, FL, 3301	S □□Add
			Remove
			⊥ □Change
MGR	MOBIUS INVESTMENTS LLC	6321 NW 175TH TERRACE HIALEAH, FL, 3301	5 ■Add
			Change
			🗆 Add
			□Remove
			Change
			DAdd
			Remove
			DChange
			🗆 Add
		<u> </u>	DRemove
			ÓChange

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. If am	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
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(If an ef Note:	tive date, if other than the date of filing:(03/07/2020(optional) flective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Put If the date inserted in this block does not meet the applicable statutory filing requirements, this date will nent's effective date on the Department of State's records.	rsuant to 605.0207 I not be listed as t
ne reco ord is f	rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90 iled.	0th day after the
Dated	- 2 Top	
	Signature of a member or authorized representative of a member	
	KEN AGRAVANTE	

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Elling East \$75.00