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PICK-UP	☐ WAIT	MAIL		
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Certified Copies Certificates of Status				
Special Instructions to	Filing Officer			
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Office Use Only



March 23, 2021

Florida Department of State Division of Corporation PO BOX 6327 Tallahassee, FL 32314

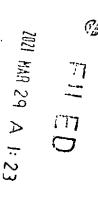
Dear Sir or Madam

Enclosed is a check for the filing fee in the amount of \$25.00 and the articles of amendment to articles of organization.

Should you have any questions or concerns, please do not hesitate to contact my office at (305)-570-2326 or at <u>rocky@lawcls.com</u>.

Regards,

/s/Rachamin Cohen, Esq. 101 NE 3rd Ave., Ste 1500 Fort Lauderdale, FL 33301



COVER LETTER

	gistration Section vision of Corporations
eun uren	Molo Holdings LLC
SUBJECT	Name of Limited Liability Company
The enclos	ed Articles of Amendment and fee(s) are submitted for filing.
Please retu	m all correspondence concerning this matter to the following:
	Maurice Hogarth Name of Person
	Name of Person
	3166 N. 34th Street
	Address
	Hollywood, FL 33021
	City/State and Zip Code mo2781@aol.com;
For further	E-mail address: (to be used for future annual report notification) information concerning this matter, please call:
M	Nume of Person Area Code Daytime Telephone Number
Enclosed i	s a cheek for the following amount:
X\$25.00	Filing Fee LI \$30.00 Filing Fee & LI \$55.00 Filing Fee & LI \$60.00 Filing Fee, Certificate of Status Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)
Ŋ	ailing Address: Street Address:
R E	egistration Section Registration Section ivision of Corporations Division of Corporations
	The Centre of Tallahassee allahassee, FL 32314 Tallahassee, FL 32303 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(<u>Name of the Limited Liability Compa</u> (A Florida Limited I	ny as it now appears on our records.) lability Company)	
The Articles of Organization for this Limited Liability Company lorida document number 1,20000111162	were filed on APRIL 23, 2020	and assigned
his amendment is submitted to amend the following:		
a. If amending name, enter the new name of the limited liab	ility company here:	
he new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS)		
inter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
	<u> </u>	
If amending the registered agent and/or registered office a gent and/or the new registered office address here:	iddress on our records, <u>enter the na</u>	me of the new regist
Name of New Registered Agent:		·····
Name of New Registered Agent: New Registered Office Address:		
	Enter Florida street address , Florida	2021
New Registered Office Address:		Zip Code MAR
If amending name, enter the new name of the limited liability company here: new name must be distinguishable and contain the words "Limited Liability Company," the designation "L.I.C" or the abbreviation "L.I.C" ter new principal offices address, if applicable: incipal office address MUST BE A STREET ADDRESS) ter new mailing address, if applicable: adding address MAY BE A POST OFFICE BOX) If amending the registered agent and/or registered office address on our records, enter the name of the new registered ent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address Florida		

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 Title Name Address **Type of Action** ____ = Add 9 ⊒πange $\square Add$

Change

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reffective date is listed, the date must te: If the date inserted in this block	be specific and cannot be prior to date of ck does not meet the applicable statu	filing or more than 90 days after fi	ling.) Pursuant to 60	15.020 3031 o
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October 30 ed	2020		Par -	•
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	Ma in for	1 A	→	
	Signature of a member or authorized repr			

Filing Fee: \$25.00