7/29/22, 6:38 PM

Division of Corporations



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H22000257459 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

Fram:

Account Name : ALEX PINA CO. Account Number : I20190000095 : (305)803-8471 Phone Fax Number : (305)602-3977

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

Email Address:___

client@alexpina.co

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN POWER MOVE SOLUTIONS LLC

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

Electronic Filing Menu

Corporate Filing Menu

Help

To: , Page: 3 of 5 2022-07-29 22:43:20 GMT 13056023977 From: Alex Pina

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

POWER MOVE SOLUTIONS LLC (Name of the Limited Liability Company as it now appears on our records.)

(A Florida Limited Liability Company)	
The Articles of Organization for this Limited Liability Company were filed on 05/22/2020 Florida document number L20000139950	and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability company here:	
The new name must be distinguishable and contain the words "Limited Liability 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)	
Enter new mailing address, if applicable:	·
(Mailing address MAY BE A POST OFFICE BOX)	_
B. If amending the registered agent and/or registered office address on our records, enter the na agent and/or the new registered office address here: Name of New Registered Agent:	me of the new registered
	11. 150 150
New Registered Office Address: Enter Florida street address	Aug -
Florida	Zin Code 5
New Registered Agent's Signature, if changing Registered Agent:	D ESTA FLOR
I hereby accept the appointment as registered agent and agree to act in this capacity. I further a provisions of all statutes relative to the proper and complete performance of my duties, and I at accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Cheing filed to merely reflect a change in the registered office address, I hereby confirm that the company has been notified in writing of this change.	n familiar with and r, if this document is
If Changing Registered Agent, Signature of New 1	Registered Ageni

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

MGR = Manager AMBR = Authorized Member

. Pege: 4 of 5

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	LUIS GOMEZ	2084 Renaissance Blvd APT 207	aAdd
			TRemove
		Miramar, FL 33025	Change
MGR	AMPARO ACEVEDO	2081 Renaissance Blvd APT 207	≅ Add
			⊇Remove
		Miramar, FL 33025	□Change
<u></u>			= Add
			Remove
			TChange
			□Remove
			TChange
			□Add
			Remove
			□Change
	···		
			= Remove
			Change

N/A		_		-	
				<u></u>	
					
			·-		
				<u> </u>	
	 -				
					-
	<u> </u>	, <u>,.</u>			

	·				
Effective date, if other than the	date of filing:			(option	nal)
Note: If the date inserted in this bidocument's effective date on the D	lock does not meet	the applicabl	e statutory filing	requirements, this (date will not be listed a
e record specifies a delayed effectived is filed.	re date, but not an	effective time	, at 12:01 a.m. or	the earlier of: (h)	The 90th day after th
Dated JULY 29TH	. 2	.022			
· · · · · · · · · · · · · · · · · · ·		Coffee Co			
		\ ' /	ed representative o	f., mumbur	·

Typed or printed name of signee

From, Alex Pine