Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : LEGALZOOM.COM INC. Account Number : I20010000062

Phone : (323)962-8600 : (323)962-3889 Fax Number

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

Email Address:__

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN MUTUAL FOREIGN EXCHANGE LLC

Certificate of Status	0
Certified Copy	1
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Help



COVER LETTER

TO: Registration of Division of	on Section f Corporations		
	UAL FOREIGN EXCHANGE LLC		
3010 ECT	Name of Limi	ited Liability Company	
The enclosed Article	es of Amendment and fee(s) are sub-	mitted for filling.	
Please return all cor	respondence concerning this matter	to the following:	
	Cheyenne Moseley		
		Name of Person	
	Legalzoom.com, Inc.		
		Firm/Company	
	101 S Brand Blvd 11th Fl		
		Address	
	Glendale, CA 91203		
		City/State and Zip Code	
	Chiefpateh@Yahoo.com		
	E-mail address: (to he used for future annual report notif	tication)
For further informat	tion concerning this matter, please ca	all:	
Cheyenne Moseley	ame of Person	800 773-0888	
N	ame of Person	Area Code Daytim	e Telephone Number
Enclosed is a check	for the following amount:		
□ \$25.00 Filing F	ee	■ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2020."" 20 AHTI: 46

MUTUAL FOREIGN EXCHANGE		
(Name of the Limited	Liability Company as it now appears on our Florida Limited Liability Company)	records.)
The Articles of Organization for this Limited Lial Florida document number L20000151363	oility Company were filed on 06/03/2020	and assigned
This amendment is submitted to amend the follow	ving:	
A. If amending name, enter the new name of t	he limited liability company here:	
MUTUAL EXCHANGE LLC		
The new name must be distinguishable and contain the wor	ds "Limited Liability Company," the designation	"LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applical	ole:	
(Principal office address MUST BE A STREET		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE B	<u></u>	
B. If amending the registered agent and/or registered agent and/or the new registered offi		ecords, enter the name of the
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street	address
		PL 44.
	City	, Florida Zip Code

New 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 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 a or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Actio
			□ Add
		Remove	
	**************************************	☐ Change	
		□ Add	
		□ Remove	
		□ Change	
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			☐ Change

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(Han effet <u>Note:</u> 1	e date, if other than the date of filing: (optional) tive date is listed, the date must be specific and carnot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.020. The date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as at's effective date on the Department of State's records.
f the rece	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of 00th day after the record is filed.
b) The S	
b) The S	July 6th 2020
b) The S	July 6th 2020. Appl: ~ Signature of a member of authorized representative of a member

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Typed or printed name of signee

Filing Fee: \$25.00