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(Requestor's Name)	
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(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
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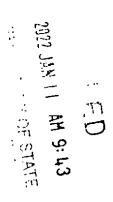
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COVER LETTER

TO:

TO: Registration S Division of Co			
SUBJECT:	Name of Lir	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are submitted for filing. Indence concerning this matter to the following: DON PINGARO Name of Person MOMENT REAL ESTATE, LLC Firm/Company 10837 GARDEN RIDGE COURT Address DAVIE, FLORIDA 33328 City/State and Zip Code donnie, pingaro@sideine, com E-mail address: (to be used for future annual report notification) oncerning this matter, please call: Terson at (
Please return all corresp	ondence concerning this matter	to the following:	
	DON PINGARO		
		Name of Person	
	MOMENT REAL ESTAT	TE. LLC	
	<u> </u>	Name of Person TE. LLC Firm/Company COURT Address 28 City/State and Zip Code om (to be used for future annual report notification) call: at (
e enclosed Articles of Amendment and fee(s) are submitted for filing. case return all correspondence concerning this matter to the following: DON PINGARO			
		Address	
	DAVIE, FLORIDA 3332	8	
		City/State and Zip Code	
For further information c		,	ification)
Don Pingaro		305 389-2922	
Name c	of Person		ne Telephone Number
Enclosed is a check for the	he following amount:		
■ \$25.00 Filing Fee		Certified Copy	Certificate of Status & Certified Copy
			ection
P.O. Box 632	7	The Centre of T	Fallahassee
Tallahassee, I	EL 32314	2415 N. Monro	e Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MOMENT REAL ESTATE LLC

(Name of the Limited Liability Co (A Florida Limi	mpany as it now appears on our records.) ted Liability Company)	
The Articles of Organization for this Limited Liability Comp. Florida document number $\frac{1.21000003755}{1.000000000000000000000000000000000000$	any were filed on F6/2021	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	liability company here:	
he new name must be distinguishable and contain the words "Limited I.	iability 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	<u> </u>	
Inter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		. =
3. If amending the registered agent and/or registered off	ice address on our records, <u>enter the na</u>	me of the new registo
gent and/or the new registered office address here:		. 22 J
Name of New Registered Agent:		294 246
New Registered Office Address:		
	Enter Florida street address	# 9: 1.3
	Florida _	TVIII Confi

New Registered Agent's Signature, if changing Registered Agent:

Thereby 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.

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

<u>Title</u>	Name	Address	Type of Action
MGR	IIILARY SAUNDERS	10837 GARDEN RIDGE COURT	
		DAVIE, FL 33328	≡ Remove
			Change
			□Add
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ective date, if other than the date effective date is listed, the date must be	te of filing:specific and cannot be prior to dat	e of filing or more than 9	(optional)) days after tiling.) Pursuan	it to 605,020
e: If the date inserted in this block ument's effective date on the Depart	tment of State's records.	stantiory ming require	nems, this date with not	ne listed a
cord specifies a delayed effective da s filed.	ite, but not an effective time, a	it 12:01 a.m. on the ea	lier of: (b) The 90th d	ay after the
edDecember 29				
Dog Pine	a A O			
Sig	nature of a member or authorized	representative of a mem	per	