## 121000094734

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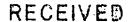
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SECRETARY OF STATE

Office Use Only

JAN 26 2022



### FLORIDA DEPARTMENT OF STATE 2022 JAN 24 PM 2: 10

Letter Number: 022A00000738

Division of Corporations SECRETARY OF STATE
TALLAHASSEF. FI

January 11, 2022

MICHAEL ANDERSON 1095 4TH LANE SW VERO BEACH, FL 32962

SUBJECT: 3MOVES LOGISTICS LLC

Ref. Number: L21000094734

We have received your document for 3MOVES LOGISTICS LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The titles you have listed for the individuals or business entities which will manage the limited liability company are not acceptable. We cannot accept the terms: partner, officer, owner or member. You must insert the letters "MGRM" for each individual or business entity that is a member and will serve in a managerial capacity. If the individual or business entity is not a member, but will serve in a managerial capacity, you must insert the letters "MGR." We will also accept "Authorized Representative", "Authorized Person", and "Authorized Member".

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Octavia L Simmons
Regulatory Specialist II Supervisor

www.sunbiz.org

### **COVER LETTER**

TO:

Registration Section
Division of Corporations

Tallahassee, FL 32314

SUBJECT: 3.	Moves Logistics LLC					
SUBJECT:	Name of Lin	nited Liability Company				
The enclosed Articles	s of Amendment and fee(s) are sub	omitted for filing.				
Please return all corre	espondence concerning this matter	to the following:				
	Michael Anderson					
		Name of Person	···			
	3Moves Logistics LLC					
	<del></del>	Firm/Company				
	1095 4th ln sw					
		Address				
	Vero Beach Fl 32962	Vero Beach Fl 32962				
		City/State and Zip Code	_			
	anderson6631@att.net					
		(to be used for future annual report n	otification)			
For further information	on concerning this matter, please of	call:				
Michael Anderson		757 692-4117				
Nar	ne of Person	at () Area Code Dayt	ime Telephone Number			
Enclosed is a check f	or the following amount:					
■ \$25.00 Filing Fed	e S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60,00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)			
Mailing Add		Street Address:				
Registration of Division of Control of Contr	on Section of Corporations	Registration S Division of C				
P.O. Box		The Centre of				

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION FILED OF

2022 JAN 24 AM 6: 39

3Moves Logistics LLC (Name of the Limited Liability Company as it now appears on our records.)) Grame of the Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on  $\frac{02/25/2021}{1}$ Florida document number L21000094734 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 "LLC." 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 name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address \_, Florida \_ City

### 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 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 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

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
AMBR BUSHELS-CUE, NEFERTERIA	1095 4th In sw		
	Vero Beach fl 32962	■Remove	
			□Change
M6RM Michael Anderson	1095 4th In sw	<b>=</b> Add	
	Vero Beach Fl 32962	□Remove	
			□Change
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an effect ote: If	e date, if other than the date of filing:  (optional)  ive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0297 the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as it's effective date on the Department of State's records.
record s I is filed	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
	12/14/21
ated	
ated	
Dated	Michae NgeASON Typed or printed name of signee

Filing Fee: \$25.00