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# CORPORATE

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# WALK IN

	PICK UP: Danny 5/27	
	CERTIFIED COPY	
XX	РНОТОСОРУ	
	CUS	
<b>X</b>	FILING LLC Amond	
	MUSCLE HUSTLERS MOVERS LLC (CORPORATE NAME AND DOCUMENT#)	
	(CORPORATE NAME AND DOCUMENT #)	
	(CORPORATE NAME AND DOCUMENT #)	
	(CORPORATE NAME AND DOCUMENT #)	
	(CORPORATE NAME AND DOCUMENT #)	***
-	(CORPORATE NAME AND DOCUMENT #)	
CIAI FRU	CTIONS:	

## **COVER LETTER**

ro: Registration Sec Division of Corp			
	ders Movers LLC		
SUBJECT:	Name of Limite	ed Liability Company	
	Amendment and fee(s) are subm indence concerning this matter to		
Please return an correspon	ndence concerning this matter to	, the following.	
	Ariail Burton		
		Name of Person	
		Firm/Company	<del></del>
	6189 9th Ave Cir NE		
		Address	
	Bradenton Florida 34212		
		City/State and Zip Code	
	higriley@verizon.net E-mail address: (t	o be used for future annual report not	tification)
For further information of	oncerning this matter, please ca	d1:	
Ariail Burton		941 359-8422 at ()	
Name o	of Person	Area Code Daytir	me Telephone Number
Enclosed is a check for t	he following amount:		
S25.00 Filing Fee	■ 530 00 Filing-Fee & Certificaty 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)
<u>Mailing Addre</u> Registration		Street Address: Registration S	Section
Division of C	Corporations	Division of Co The Centre of	orporations
P.O. Box 63 Tallahassee,			roe Street, Suite 810

Tallahassee, FL 32303

### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Muscle Hustlers Movers LLC	to the second of	
(Name of the Limited Liability Company (A Florida Limited Lia	ability Company)	
The Articles of Organization for this Limited Liability Company was document number. L21000145234	were filed on 3/29/2021	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabil	ity company here:	
Muscle Hustlers Moving LLC		
The new name must be distinguishable and contain the words "Limited Liability"	ty Company," the designation "LLC"	or the abbreviagon "L.L.C."
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		A STATE OF THE PARTY OF THE PAR
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		30
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:  Name of New Registered Agent:	iddress on our records, <u>enter t</u>	he name of the new registo
N D Count Off of Address		
New Registered Office Address:	Enter Florida street address	
·		rida
<del></del> _	City	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 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
			□Add
			□Remove
			□Change
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		,	□ Change

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te tere	
(If an et <u>Note:</u>	ive date, if other than the date of filing:
f the red b) The	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 90th day after the record is filed.
Dated	5-27 2621
	5-27  Aucid & Durfor  Signature of a member or authorized representative of a member
	HRIAIL G. BURTON Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00