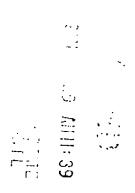
L21000148925

(Re	equestor's Name)	
(Ac	ldress)	
(Ad	idress)	
(Cit	ty/State/Zip/Phone	÷#)
PICK-UP	WAIT	MAIL
(Bu	isiness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to Filing Officer:		

Office Use Only



000368875450



RECEIVED

2021 JUL 29 PH 4: 35

DIVISION OF LOGISTIONS

JUL 1661

Sunshine State Corporate Compliance Company

3458 Lakeshore Drive Tallahassee, Florida 32312 (850) 656-4724

DATE 7/29/2021	
ENTITY NAME WE MO	VE INTERNATIONALLY LLC
DOCUMENT NUMBER_	
	PLEASE FILE THE ATTACHED AND RETURN
XXXXX	Plain Copy
	Certified Copy
	Certificate of Status
*:	*PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY**
	Certified Copy of Arts & Amendments
	Certified Copy of Arts & Amendments Complete File (Including Annual Reports)
	Certificate of Status
	Certificate of Status Reflecting:
	APOSTILLE' / NOTARIAL CERTIFICATION
COUNTRY OF DESTINAT	70N
NUMBER OF CERTIFICAT	TES REQUESTED
TOTAL OWED \$ 25.00	ACCOUNT # 120160000072 4: C)
Please call Tina at th	he above number for any issues or concerns. Thank you so much!

COVER LETTER

Div	ision of Corp	oorations		
SUBJECT:		Internationally LLC		
SUBJECT		Name of Lim	ited Liability Company	
The enclosed	Articles of A	Amendment and fee(s) are sub-	mitted for filing.	
Please return	all correspor	ndence concerning this matter	to the following:	
		Angela Garner		
			Name of Person	
		ZenBusiness, Inc.		
			Firm/Company	
		5511 Parkerest Drive, Suit	e 207	
			Address	
		Austin, TX, 78731		
		fulfillment@zenbusiness.co	City/State and Zip Code	
		E-mail address: (to be used for future annual report notiti	cation)
For further in	nformation co	oncerning this matter, please co	all:	
Angela Gari	ner c/o ZenBı	isiness, Inc.	844 493-6249	
	Name of	Person	at () Area Code Daytime	Telephone Number
Enclosed is a	reheck for th	e following amount:		
■ \$25.00 F	filing Fee	□ \$30.00 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 ADDRESS: Registration Section Division of Corporations P.O. Box 6327

TO:

Registration Section

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

WE MOVE Internationally LLC		
(<u>Name of the Limited Liability Compa</u> (A Florida Limited)	iny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company	were filed on 03/30/2021 and assigned	
lorida document number 1.21000148925		
his amendment is submitted to amend the following:		
. If amending name, enter the new name of the limited liab	oility company here:	
te new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the abbreviation "L.L.C."	
nter new principal offices address, if applicable:	26844 Juniper Bay Dr	
Principal office address MUST BE A STREET ADDRESS)	(SS) Wesley Chapel, FL	
	33544	
nter new mailing address, if applicable:	26844 Juniper Bay Dr	
Mailing address MAY BE A POST OFFICE BOX)	Wesley Chapel, FL	
	33544	
3. If amending the registered agent and/or registered of egistered agent and/or the new registered office address her Name of New Registered Agent:	<u>e</u> :	
New Registered Office Address:		
New Registered Office Address.	Enter Florida street address	
-	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

Title	<u>Name</u>	Address	Type of Action
AMBR	Brandy J. Essex	26844 Juniper Bay Dr Wesley Chapel, FL 33544	Add
			□ Remove
			☐ Change
			
			☐ Remove
			☐ Change
			□ Remove
			☐ Change
			□ Add
			☐ Change
			□ Remove
			☐ Change
			☐ Remove
			□ Change

 		
•		
		
		
<u> </u>	<u> </u>	
Note: If the date inserted in the	the date of filing: e must be specific and cannot be prior to date or tis block does not meet the applicable stat he Department of State's records.	(optional) f filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(autory filing requirements, this date will not be listed as the
f the record specifies a delable. b) The 90th day after the	ayed effective date, but not an ef record is filed.	fective time, at 12:01 a.m. on the earlier of:
Dated July 29	. 2021	
15/ Bran	Signature of a member or authorized rep	Committee Committee

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00