## L21000215469

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Special Instructions	s to Filing Officer:	
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Office Use Only



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ALLAHASSEE, FLORIDA

2021 JUL 29 PM 1: 15

## **COVER LETTER**

TO: Registration Se			
SUBJECT: Moving A	Along LLC		
3010/LCT	Name of Lim	ited Liability Company	<del></del>
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Stanley Joseph Cich	nowski	
		Name of Person	
	Moving Along LLC		
		Firm/Company	
	2306 Pentland Rd		
		Address	
	Panama City, FL 32	444	
		City/State and Zip Code	
	stanley.cichowski@mo E-mail address: (	vingalong.co to be used for future annual report notific	cation)
For further information of	concerning this matter, please ca	all:	
Stanley Cichowski	i i	at (850 ) 3290376	
Name (	of Person		Felephone Number
Enclosed is a check for t	he following amount:		
<b>№</b> \$25.00 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		Street Address:	ion

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Moving Along LLC		
(Name of the Limi	ted Liability Company as it now appea (A Florida Limited Liability Company)	rs on our records.)
The Articles of Organization for this Limited L. Florida document number <u>L21000215469</u>	iability Company were filed on 10	OMay2021 and assigned
This amendment is submitted to amend the fol-	owing:	
A. If amending name, <u>enter the new name c</u>	of the limited liability company h	e <u>re</u> :
The new name must be distinguishable and contain the	words "Limited Liability Company," the o	esignation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:	
(Principal office address MUST BE A STRE)	ET ADDRESS)	2
Enter new mailing address, if applicable:		
(Mailing a <u>ddress MAY BE A POST OFFICE</u>	<u>BOX</u> )	
B. If amending the registered agent and/or agent and/or the new registered office addre		ecords, enter the name of the new registered
Name of New Registered Agent:	Registered Agents Inc.	
New Registered Office Address:	7901 4th St N, STE 300	
	Enter Flo	rida street address
	St. Petersburg	, Florida 33702
	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 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>	Address	<b>Type of Action</b>
AMBR	Jennifer L. Cichowski	2306 Pentland Rd.	□Add
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D., If amending any other info	rmation, enter change(s) here: (Attach additional sheets, if necessary.)	
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E. Effective date, if other than	the date of filing: (optional)	
Note: If the date inserted in th	the date of filing:	o 605.0207 (3)(b e listed as the
If the record specifies a delayed effi record is filed.	ective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day	after the
Dated May 21	2021	
	Stanley Cichowski Signature of a member or authorized representative of a member	
	Signature of a member or authorized representative of a member	_
	Stanley Cichowski	
	Typed or printed name of signee	

Filing Fee: \$25.00