From: Patty Sclimenti

## Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

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From:

Account Name : UNITED AGENT SERVICES LLC

Account Number: 120210000087 Phone: (866)246-2669 Fax Number: (520)333-2793

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: hohonick@yahoo.com

### LLC AMND/RESTATE/CORRECT OR M/MG RESIGN UNITED MOVING MANAGEMENT LLC

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Electronic Filing Menu Corporate Filing Menu

Help

#### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(((H210004216273)))

Zip Code

**B**10/15

(Name of the Limited Liability Company as it (A Florida Limited Liability)  The Articles of Organization for this Limited Liability Company were fill Florida document number L21000246960  This amendment is submitted to amend the following:	4			
Florida document number L21000246960	led on 05/26/2021 and assigned			
his amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liability co	mpany here:			
The new name must be distinguishable and contain the words "Limited Liability Com	sany," the designation "LLC" or the abbreviation "L.L.C."			
Enter new principal offices address, if applicable:	N Federal Hwv			
Principal Office address MUST BE A STREET ADDRESS;	Raton, FL 33487			
Enter new mailing address, if applicable:				
Mailing address MAY BE A POST OFFICE BOX) 6699	6699 N Federal Hwy			
Boca	Boca Raton, FL 33487			

#### 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.

City

To: -18506176383 ·

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2021-11-15 15:04:05 EST

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From: Patty Sclimenti

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# 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	Type of Action
MGR	Maria Toto Holderman	6699 N Federal Hwy	■Add
		Boca Raton, FL 33487	Remove
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record speci Lis filed	fies a delayed effective of	date, but not an eft	fective time, at 12	(I) a mon the ear	lier of (h). The 90	th day affe	r the
atedNo	vember 15	202	21				

Typed or printed name of signee