

Division of Corporations

L21000311368

Florida Department of State
Division of Corporations
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ALL INFORMATION CONTAINED
HEREIN IS UNCLASSIFIED
DATE 01-11-2011 BY 60322
UCBAW/STP/STP

To: Division of Corporations
Fax Number : (850) 617-6363

From: Account Name : LEGALZOOM.COM INC.
Account Number : 120010000562
Phone : (323) 962-8600
Fax Number : (323) 962-3889

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

Email Address: _____

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FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
U MOVE WE HAUL LLC

Certificate of Status	0
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OCT 05 2021

A. LUNT

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COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: U MOVE WE HAUL LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Cheyenne Moseley

Name of Person

Legalzoom.com, Inc.

Firm/Company

101 N Brand Blvd 11th Fl

Address

Glendale, CA 91203

City/State and Zip Code

umovewehaul904@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Cheyenne Moseley

800 773-0888
at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$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:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
266 E Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

U MOVE WE HAUL LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

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The Articles of Organization for this Limited Liability Company were filed on 07/07/2021 and assigned
Florida document number L21000311368

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 "L.L.C."

Enter new principal offices address, if applicable:

2964 Alpaca Ave.

(Principal office address MUST BE A STREET ADDRESS)

Middleburg, FL 32068

Enter new mailing address, if applicable:

2964 Alpaca Ave.

(Mailing address MAY BE A POST OFFICE BOX)

Middleburg, FL 32068

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:

Henry Pridgen

New Registered Office Address:

2964 Alpaca Ave.

Enter Florida street address

Middleburg

Florida

32068

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.

Henry PRIDGEN

Henry Pridgen

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>	<u>Type of Action</u>
AMBR	KEVIN MESTRE JR.		<input type="checkbox"/> Add
		11723 WELLS CREEK PKWY, 1404 JACKSONVILLE, FL 32256	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	ELLIOT EMOND		<input type="checkbox"/> Add
		11723 WELLS CREEK PKWY, 1404 JACKSONVILLE, FL 32256	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Henry Pridgen	2964 Alpaca Ave. Middleburg, FL 32068	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

FIELD
SECRETARY OF STATE
DIVISION OF CORPORATION

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E. Effective date, if other than the date of filing: _____ (optional)

Effective date, if other than the date of filing: _____ (optional)
(If an effective 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 605.0207 (3)(b),
this document is being filed as a continuation of the application filed on _____, and this date will not be listed as the
effective date of this document.

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record 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 record is filed.

Dated 09/22/2021.

HENRY PRINGLE N

Signature of a member or authorized representative of a member

Henry Pridgen

Type or printed name of signer