21000418632

(Re	questor's Name)	
DA)	dress)	
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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COVER LETTER

TO:

Registration Section Division of Corporations

Tallahassee, FL 32314

M. O. P.	S REAL ESTATE LLC		
	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	MAX KIEJDAN		
		Name of Person	
	MONEYUS REAL ESTA	TE LLC	
		Firm/Company	
	6181 NW 23rd RD		
	 -	Address	
	BOCA RATON, FL		
		City/State and Zip Code	
	KIEJDAN.MAX@gmail.co	m to be used for future annual report not	
For further information c	e-mail address: (meation)
MAX KIEJDAN		609 338-9306	
Name o	d' Person	at ()	ne Telephone Number
Enclosed is a check for t	he following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed
Mailing Address Registration		<u>Street Address:</u> Registration Se	ection
Division of C		Division of Co	
P.O. Box 632		The Centre of	-

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2021 SEP 29 PH 11: 52

MONEYUS REAL ESTATE LLC

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

SECRETARY OF STATE

	(, , , , , , , , , , , , , , , , , , ,	MELMINGOLLTIC
The Articles of Organization for this Limited Florida document number $\frac{L21000418632}{L21000418632}$	Liability Company were filed on 9/22/2021	and assigned
This amendment is submitted to amend the f	ollowing:	
A. If amending name, enter the new name	e of the limited liability company here:	
The new name must be distinguishable and contain th	e words "Limited Liability Company," the designation "L	LC" or the abbreviation "L.L.C."
Enter new principal offices address, if app	dicable:	
(Principal office address MUST BE A STR.	EET ADDRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFIC		
B. If amending the registered agent and/o agent and/or the new registered office add	r registered office address on our records, <u>ent</u> ress here:	er the name of the new registere
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street add	dress
		Florida
	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>	<u>Name</u>	Address	Type of Action
MGR	Max Kiejdan	6181 NW 23rd Rd, Boca Raton, FL 33434	<u></u>
			□Remove
			□Change
	-,40		🗆 Add
			Remove
			□Change
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ective date, if other than the da	ate of filing:		(optional)	
effective date is listed, the date must be	 specific and cannot be prior to c does not meet the applicabl 	date of filing or more than 9 e statutory filing require	0 days after filing.) Pursuant (ments, this date will not b	to 605.020° e listed as
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