Division of Corporations



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H24000366848 3)))



H240003658483ABC8

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081

Phone : (307)200-2803

Fax Number : (813)436-5206

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

•		
Ema	i I	22athhA

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN MO JO BO LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

T. LEMIEUX

NOV - 5 2024

Help

Electronic Filing Menu Corporate Filing Menu

11/4/2024 10.22.40 PST • Tb. 18506176383 Page: 2/4 Fex: 8134365206

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MO JO BO LLC		
(Name of the Limited Liability Comps (A Florida Limited	any as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number L21000434710	were filed on 10/04/21	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	pility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	ility Company," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	3833 Powerline Rd Suite 201-K	
(Principal office address MUST BE A STREET ADDRESS)	Fort Lauderdale, FL 33309	
		. · · · · · · · · · · · · · · · · · · ·
Enter new mailing address, if applicable:	3833 Powerline Rd Suite 201-K	.,\
Mailing address MAY BE A POST OFFICE BOX)	Fort Lauderdale, FL 33309	
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>enter the</u>	e name of the new register
Name of New Registered Agent:	···	
New Registered Office Address:	Enter Florida street address	
	, Florid	da

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.

11/4/2024 10 22:40 PST

To: 18506176383

Page: 3/4

Fax: 8134365206

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
			□Add
			□Remove
			Change
			□Ađd
			□Remove
			☐ Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			☐ Change
			□Add
			□Remove
			☐ Change
			□Remove
			C'hanna

Fax: 8134365206

D. If amending any other in	ormation, enter change(s) here: (Attach additional shoots, if necessary.)
	
Note: If the date inserted in	the date of filing:
If the record specifies a delayed record is filed.	feetive date, but not an effective time, at 12:01 a.m. on the earlier of: (b)—the 90th day after the
Dated November 4	2024
	Signature of a member or authorized representative of a member
	Nat Smith

Typed or printed name of signee