

L220000309690

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

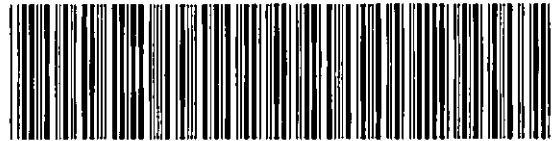
(Document Number)

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LLC amend

09/12/22--01014--015 **25.00

2022 SEP 12 PM 12:08

2022 SEP 12 PM 12:46

RECEIVED

FILED

A. RAMSEY
SEP 12 2022

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: MOI DAYTONA HD PROP 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:

JESSICA ALTAMIRANO

Name of Person

MORSE OPERATIONS INC

Firm/Company

2850 S FEDERAL HIGHWAY

Address

DELRAY BEACH FL 33483

City/State and Zip Code

JESSICAALTAMIRANO@EDMORSE.COM

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

For further information concerning this matter, please call:

DENNIS MACINNES

561 455-1111
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 Address:

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**

FILED
2022 SEP 12 PM 12 46

MOI DAYTONA HD PROP LLC

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

The Articles of Organization for this Limited Liability Company were filed on 7/12/2022 and assigned
Florida document number L22000309690.

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 "LLC."

Enter new principal offices address, if applicable: _____

(Principal office address MUST BE A STREET ADDRESS) _____

Enter new mailing address, if applicable: _____

(Mailing address MAY BE A POST OFFICE BOX) _____

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: _____

New Registered Office Address: _____

Enter Florida street address

_____, 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 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>
MGR	MORSE OPERATIONS INC	2850. S FEDERAL HIGHWAY	<input checked="" type="checkbox"/> Add
		DELRAY BEACH, FL 33483	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	TJM III LLC	2850 S FEDERAL HIGHWAY	<input checked="" type="checkbox"/> Add
		DELRAY BEACH, FL 33483	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
CEO	EDWARD J MORSE III	2850 S FEDERAL HIGHWAY	<input type="checkbox"/> Add
		DELRAY BEACH, FL 33483	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
COO	RANDY HOFFMAN	2850 S FEDERAL HIGHWAY	<input type="checkbox"/> Add
		DELRAY BEACH, FL 33483	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
PRES	CARMELLO COLELLA	2850 S FEDERAL HIGHWAY	<input type="checkbox"/> Add
		DELRAY BEACH, FL 33483	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
CFO	DENNIS MACINNES	2850 S FEDERAL HIGHWAY	<input type="checkbox"/> Add
		DELRAY BEACH, FL 33483	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change

[illegible]

(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)

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 September 9, 2022

Signature of a member or authorized representative of a member

Randy Hoffman

Typed or printed name of signee

Filing Fee: \$25.00