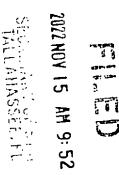
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Special Instructions to F	Filing Officer:	
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Office Use Only



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2022 NCT 15 Pr

## COVER LETTER

TO: Registration Sec Division of Corp		·	
SUBJECT: THE	- MOVE COM	IPANY LLC	··
	Name of Limi	ted Etablity Company	
The enclosed Articles of A	Amendment and fee(s) are subr	nitted for filing.	
Please return all correspon	idence concerning this matter t	to the following:	
	Zachary	Gilchrist Name of Person	the Ave  3 30 2 7  Zip Code  at lock. (om  are annual report notification)  1
	THE-MOVE	(OMPANY LL Firm/Company	<u>C</u>
	2598 SU	V 164th Ave	
	Miramar	FL 33027 City/State and Zip Code	<del></del>
	Zac.gilch	to be used for future annual report notif	ication)
For further information co	oncerning this matter, please co	all:	
Zachary G	Filche 13t	at (954) 683 Area Code Daytim	c Telephone Number
Enclosed is a check for th	e following amount:		
SVI \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy
<u>Mailing Addres</u> Registration S			ction
Division of C	orporations	Division of Cor	porations
P.O. Box 632 Tallahassee. F		The Centre of T 2415 N. Monro	e Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2022 NOV 15 AM 9: 52

	/*/ LLC :	
THE - MOVE COMPA  (Name of the Limited Liability Compa (A Florida Limited I.	iy as it now appears on our records.) iability Company)	MLLAHASSEE, FL
The Articles of Organization for this Limited Liability Company Florida document number <u>-                                   </u>	1/12/22	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	lity company here:	
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" or t	he abbreviation "L.L.C "
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)		
	address on our records, enter the	name of the new registered
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:  Name of New Registered Agent:	address on our records, enter the	name of the new registered
agent and/or the new registered office address here:		name of the new registered
agent and/or the new registered office address here:  Name of New Registered Agent:	enter the Enter Florida street address	name of the new registered
agent and/or the new registered office address here:  Name of New Registered Agent:	Enter Florida street address Florid	at
agent and/or the new registered office address here:  Name of New Registered Agent:	Enter Florida street address Florid	

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

Title	Name	Address	Type of Action
AMBR	THE MARKET TECHS L	Li 2241 North Monroe St	5/Add
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		Tallahassee, FL 32303	DChange
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document.	s effective dat	d in this block d e on the Departi	nent of S	state's reco	rds.	natory min	gredanen	ients, tins e	acc with th	or be have	
	: <i>17</i> d l	ed effective date		affaatis	u tuna at	12:01 a.m.	on the ear	ier of: (b)	The 90th	day after	the
e recora sp rd is filed.	ecines a delay	ed effective date	z, our not	an errecus	e time, at	12.01 а.п.	on the can	ici oi. (0)	The 700	, aug arrei	
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Filing Fee: \$25.00