L23000106453

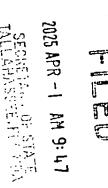
(Requestor's Name)
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Fr. 15

COVER LETTER

TO: Registration S Division of Co		•			
	r Transportation LLC				
SUBJECT:	Name of Lim	ited Liability Company	 		
The enclosed Articles o	f Amendment and fee(s) are sub	mitted for filing.	200		
Please return all corresp	ondence concerning this matter	to the following:	2025 APR -1 AM 9: LT SECREPTS SEE FUNDED		
	Maurice Thomas				
		Name of Person	E. J.		
	Mo3better Enterprise LLC				
		Firm/Company	2		
	7901 4th St N #23801	7901 4th St N #23801			
	St. Petersburg, Fl 33702	St. Petersburg. Fl 33702			
		City/State and Zip Code			
	ceo@mo3betterenterp				
	E-mail address: (to be used for future annual report not	ification)		
For further information	concerning this matter, please ca	all:			
Maurice Thomas		561 290-4948 at ()			
Name	of Person	Area Code Daytin	ne Telephone Number		
Enclosed is a check for	the following amount:				
S25.00 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 Addre Registration		Street Address: Registration So	ection		
	Corporations	Division of Co			
P.O. Box 63		The Centre of	Tallahassee		

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Mo3better Transportation LLC				
(Name of the Limite	ed Liability Compai (A Florida Limited L	ny as it now appears on our re liability Company)	ecords.)	
The Articles of Organization for this Limited Li	ability Company	were filed on February 28,	2023 and assigned	i
Florida document number L23000106453	·			
This amendment is submitted to amend the follo	owing:			
A. If amending name, enter the new name of	the limited liabi	lity company here:		
Mo3better Enterprise LLC.				
The new name must be distinguishable and contain the w	ords "Limited Liabili	ity Company," the designation	"LLC" or the abbreviation "L.L.C."	
Enter new principal offices address, if applica	able:	7901 4th St N #23801		
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		St. Petersburg, Fl 33702	2025 1961	
			- 	-
Enter now mailing address if annlicable:			R-1	
Enter new mailing address, if applicable:			in c	T I
Mailing address MAY BE A POST OFFICE		F 9:		
			30 E	—
B. If amending the registered agent and/or re	~ /	ddress on our records, <u>e</u>		istere
agent and/or the new registered office addres	s here:			
Name of New Registered Agent:	Sunshine Corpo	orate Filings LLC		
New Registered Office Address:	7901 4th St N S	TE 300		
Non Registered Office Hadress.		Enter Florida street a	ddress	
	St. Petersburg		, Florida <u>33702</u>	
		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

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<u>Title</u>	<u>Name</u>	Address	Type of Action
Secretary	Deloris Watkins	13875 NW 22nd Avenue #228	≡ Add
		Opa-Locka, Fl. 33054	□Remove
			Change
			□Add
			□Remove
			☐ Change
		<u> </u>	□Add
			Premove
			ASSTORAGE TO STATE OF THE PROPERTY OF THE PROP
			□Change
			□ Remove
			□Change
			□Add
			Remove
			Change

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			April 15, 20)25			
f an effective d	te, if other than the ate is listed, the date mus	t be specific and	g: I cannot be prior	to date of filing or	more than 90 days af	tional) ler filing.) Pursuant t	o 605.0207
Note: If the o document's e	late inserted in this bl ffective date on the D	ock does not n epartment of S	neet the applicate's records.	able statutory fili	ng requirements, t	his date will not be	e listed as
d is filed.	fies a delayed effectiv						after the
Dated 3	4 - 23 Maun aurice Thomas		25				
				 *			

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Filing Fee: \$25.00

Typed or printed name of signee