L23000157527

(Requestor's Name)
(Address)
(Address)
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PICK-UP WAIT MAIL
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COVER LETTER

:03 Registration Section **Division of Corporations** HIGH QUALITY MOVING AND WASTE MANAGEMENT LLC SUBJECT: _ 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:

	Zsolt Sari			
	Name of Person			
	Firm/Company			
	5578 Estero loop			
	Address			
	port orange fi 32128			
	City/State and Zip Code Info@LetsRockYourMove.com			
	E-mail address: (to be used for future annual report notification)			
For further informatio	n concerning this matter, please call:			
Michael Careaga	407 797-6283 at (
Nam	ne of Person Area Code Daytime Telephone Number			

☐ \$55.00 Filing Fee &

Certified Copy

(additional copy is enclosed)

Mailing Address:

□ \$25.00 Filing Fee

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Enclosed is a check for the following amount:

☐ \$30.00 Filing Fee &

Certificate of Status

Street Address:

Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

\$60.00 Filing Fee,

Certificate of Status & Certified Copy

(additional copy is enclosed)

TO ARTICLES OF ORGANIZATION OF

HIGH QUALITY MOVING AND WASTE MANAGEMENT LLC

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

	Liability Company)	•	•
The Articles of Organization for this Limited Liability Company	were filed on $\frac{03/29}{1}$	9/2023	and assigned
Florida document number L23000157527		4	I C: 25
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	bility company here	<u>2</u> :	
Ready to Rock Moving LLC			
The new name must be distinguishable and contain the words "Limited Liab	ility Company," the des	ignation "LLC" or	the abbreviation "L,L.C."
Enter new principal offices address, if applicable:	5578 Estero loop	port orange fl 32	128
(Principal office address MUST BE A STREET ADDRESS)			
			
Enter new mailing address, if applicable:	5578 Estero loop	port orange fl 32	128
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our rec	ords, <u>enter the</u>	name of the new registere
Name of New Registered Agent:			
New Registered Office Address:			
New Registered Office Address.	Enter Floride	a street address	
		, Florid	я
	City		Zip Code
New Registered Agent's Signature, if changing Registered Agent:	<u>!</u>		
l hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as	performance of m	y duties, and I	am familiar with and

If Changing Registered Agent, Signature of New Registered Agent

or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
Mgr	Michael Careaga	5875 Dogwood Dr., Orlando, FL 32807	= Add
			□Remove
			🗆 Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□ Add
			□Remove
			□Change
			
			□Remove
			□ Change
		 	□Add
			□Remove

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	·
(If an et Note:	tive date, if other than the date of filing: [09/30/2024] [10
the reco	rd 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 iled.
Dated	9/28/2024
	Signature of a member or authorized representative of a member
	ZSOCT SARI

Filing Fee: \$25.00



October 23, 2024

ZSOLT SARI 5578 ESTERO LOOP PORT ORANGE, FL 32128

SUBJECT: HIGH QUALITY MOVING AND WASTE MANAGEMENT LLC

Ref. Number: L23000157527

We have received your document for HIGH QUALITY MOVING AND WASTE MANAGEMENT LLC and your check(s) totaling \$60.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 124A00023367

Anissa Butler Regulatory Specialist II

