

L23000258445

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

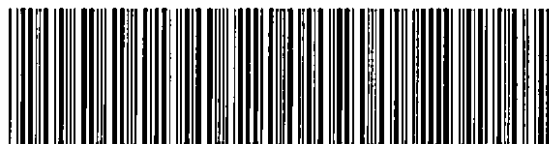
(Business Entity Name)

(Document Number)

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2023 OCT -4 PM 12:40
DIVISION OF CORPORATIONS
STATE OF FLORIDA

R. HUNT
10/04/23



Toll-Free: 1.888.449.2638



Direct: 1.805.449.2638

Email: info@CorpNet.com



www.CorpNet.com



October 2, 2023

Registration Section
Division of Corporations
2415 N. Monroe St., Suite 810
Tallahassee, FL 32303

RE: Moise Properties LLC

To whom it may concern:

The Enclosed Articles of Amendment and Fee(s) are submitted for filing.
Also, please find enclosed a check for state filing fees in the amount of **\$55.00**
made payable to the FL Dept of State. For information to this filing at the
undersigned.

Thank you in advance and please return all correspondence in regards to this
filing using the pre addressed stamped envelope included.

Sincerely,

Amanda J. Beren, Document Processor
CorpNet, Incorporated
888-449-2638 Ext. 105
filings@corpnet.com

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DIVISION OF STATE
CORPORATION



COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Moise Properties 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:

Amanda J Beren

Name of Person

Firm/Company

31416 Agoura Road, Suite 118

Address

Westlake Village, CA 91361

City/State and Zip Code

filings@corpnet.com

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

FILED
CLERK OF STATE
DIVISION OF CORPORATIONS
2023 OCT -4 PM 12:40

For further information concerning this matter, please call:

Amanda J Beren

888 449-2638
at (_____) _____
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|--|---|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input checked="" type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

MOISE PROPERTIES 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 05/26/2023 and assigned
Florida document number 1.23000258445.

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

Title	Name	Address	Type of Action
AMBR	Arline Arbuthmott-Moise	15948 SW 136 Way	<input checked="" type="checkbox"/> Add
		Miami, FL 33196	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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2003 OCT -4 PM 12:40
 DIVISION OF CORPORATION

2023 OCT 4 120 820

STATE OF TEXAS
DIVISION OF COMMERCE
2023 OCT -4 PM 12:40

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated 09/25, 2023

Duane M Moise

Filing Fee: \$25.00