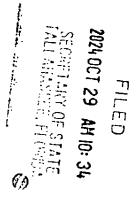


(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





10/29/24--01022--023 **30.00



COVERLETTER

TO:	Registration Section Division of Corpo	rations		
	Fide	Mouit Name of Lin	10 /.L.C	
SUBJE	CT:	Name of Lim	rited Liability Company	
The enc	losed Articles of Ar	mendment and fee(s) are sub	omitted for filing.	
Please r	eturn all correspond	lence concerning this matter	to the following:	
		Levi Soza	Name of Person	
			Name of Person	
			Firm/Company	
			• •	0 5, 0242
		3261 NE	4TH AVE BOS	A RATON FL 3343
			Addless	
			esta kon a lati et l	
		Fidelity movin	City/State and Zip Code 19 LLC (9 G moil . Co 10 be used for future annual report notifie	om .
		E-mail address: (to be used for future annual report notific	cation)
For furt	her information con	cerning this matter, please o	all:	
	Levi :	Soza	at (<u>732</u>) <u>513</u> Area Code Daytime	8942
-	Name of P	erson	Area Code Daytime	Telephone Number
Enclose	d 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)
	Registration Se	ction	Street Address: Registration Sect	ion
	Division of Cor		Division of Corp	orations
	Tallahassee, FL	. 32314	2415 N. Monroe	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Fidelity	Moving	LLC		
(Name of the Limited	Liability Company 2 Florida Limited Liabi	s it now appears on o lity Company)	ur records.)	
The Articles of Organization for this Limited Lial Florida document number <u>L 23 060 47 II</u>	bility Company we	re filed on (©]	12/2025	and assigned
inis amendment is submitted to amend the follow	ving:			
A. If amending name, enter the new name of t	he limited liability	company here:		
he new name must be distinguishable and contain the wor Enter new principal offices address, if applicate Principal office address MUST BE A STREET	ole:	Company," the designa	tion "LLC" or the	abbreviation "L.L.C."
Enter new mailing address, if applicable:	_		; ; ; ;	2024 DC
Mailing address MAY BE A POST OFFICE B	<u>0X)</u>		0.50	FILE CT29 /
3. If amending the registered agent and/or registered office address		ress on our record	s, enter the na	
Name of New Registered Agent:	Marlene	Hudson	·	
New Registered Office Address:	3261	NE 47+4 Enter Florida str	Ave eet address	
	Boca Rat		Florida	33431
		City		Zip Code

New Registered Agent's Signature, if changing Registered Agent:

r nevery accept the appointment as registered agent and agree to act in this capacity. I juriner 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.

Malene Hudson

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>	Name	Address	Type of Action
MGR	Levi Soza	3261 NE 4+4 Ave	□ Add
		BOCA RATON FL 33431	Remove
			Change
MGR	Marlene Hudson	326 NE 4TH AVE	Mdd
		BOCH RAJON FL 33431	□Remove
			□Change
			□Add
			□Remove
			□Change
			Петюve
			🗖 Add
			
			□Change
			□Add
			□Remove
			□Change

effecti <u>e:</u> If t	date, if other than the date of filing:
cord sp ifiled.	pecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after
ed	October 22. 2024.
	Signature of a member or authorized representative of a member
	Levi Soza