

L23000471108

\_\_\_\_\_  
(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:

Office Use Only



700438743077

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

FILED  
2024 OCT 29 AM 10:34  
SECRETARY OF STATE  
TALLAHASSEE, FL 32301  
②

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Fidelity Moving 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:

Levi Soza

Name of Person

Firm/Company

3261 NE 4TH AVE, BOCA RATON FL 33431

Address

City/State and Zip Code

Fidelity moving LLC@gmail.com

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

For further information concerning this matter, please call:

Levi Soza

Name of Person

at ( 732 )

Area Code

513 8942

Daytime Telephone Number

Enclosed 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)

MAILING ADDRESS:

Registration Section  
Division of Corporations  
P.O. BOX 527  
Tallahassee, FL 32314

SUITE ADDRESS:

Registration Section  
Division of Corporations  
THE CENTRE OF TALLAHASSEE  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

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

Fidelity Moving 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 10/12/2023 and assigned Florida document number L23000 471108.

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 "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)

**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:

Marlene Hudson

New Registered Office Address:

3261 NE 4TH Ave

Enter Florida street address

Boca Raton

City

Florida

33431

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.*

Marlene Hudson

If Changing Registered Agent, Signature of New Registered Agent

Title	Name	Address	Type of Action
MGR	Levi Soza	3261 NE 4TH Ave	<input type="checkbox"/> Add
		Boca RATON FL 33431	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Marlene Hudson	3261 NE 4TH Ave	<input checked="" type="checkbox"/> Add
		Boca RATON FL 33431	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins or other markings on the paper.

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing ) Pursuant to 605.0207 (3)(b)

**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.

If the record 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 record is filed.

Dated October 22, 2024

Signature of \_\_\_\_\_

Signature of a member or authorized representative of a member

Levi Soza

Typed or printed name of signee