

L240000 18943

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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WAIT

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MAIL

(Business Entity Name)

(Document Number)

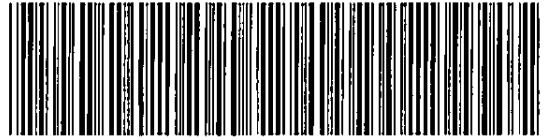
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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MOMENTS & EVENTS, 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:

Milagros Sanchez
Name of Person

Moments and Events, LLC.
Firm/Company

26 SE Street Apt 3
Address

Leake Worth Fl. 33466
City/State and Zip Code

momentsandeventsFL@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Milagros Sanchez at 561 566 - 0068
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 type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input checked="" 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 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**

MOMENTS & EVENTS, 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 1/8/2024 and assigned
Florida document number L24000018943

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Moments and Events, LLC.
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)

26 SE Street Apt 3
Lake Worth Fl. 33460

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

720 Lucerne Ave #94
Lake Worth Beach, FL
33460

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:

David Roberts

New Registered Office Address:

7901 4th Street N, Ste 300

Enter Florida street address

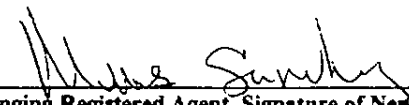
St. Petersburg, Florida 33702

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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	DIANNE WINTERMUTE	297 SANDPIPER AVE	<input type="checkbox"/> Add
		ROYAL PALM BEACH, FL 33411	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	JESSICA DUEMIG	2527 ANNAPOLIS WAY, APT 206	<input type="checkbox"/> Add
		BRANDON, FL 33511	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Milagros Sanchez	26 SE Street Apt 3	<input checked="" type="checkbox"/> Add
		Leece Worth Pl. 33460	<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
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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(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)

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 July 13th, 2024

Reilagrus Sanchez
Typed or printed name of signee