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## **COVER LETTER**

TO: Registration Sec Division of Corp			
SUBJECT:	MOORE Mobi	LE LOMES SALE	<u> </u>
- <del> </del>	Name of Limi	ited Liability Company	
The enclosed Articles of A	mendment and fee(s) are sub-	mitted for filing.	
Please return all correspon	dence concerning this matter	to the following:	
	N4	IA SUE MOORE	<u> </u>
		Mobile Lomes	
		•	
	Lupson	Address  OFI. 34167  City/State and Zip Code	
	SuE Wook E-mail address: (1	City/State and Zip Code  City/State and Zip Code  O be used for future annual report noti	fication)
For further information co	ncerning this matter, please ca	ili:	
NYIA SUE MO Name of	Person	at ( <u>503</u> ) <u>553</u> – Area Code Daytim	8695 c Telephone Number
Enclosed is a check for the	following amount:		
S25.00 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 So		Street Address: Registration Sec	ction

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

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

FILED

MODRE MOL	TILE HOME SALES LOVE PH 3: 25
	A Florida Limited Liability Company)  TALL AHASSEF FLORIS
The Articles of Organization for this Limited Liab	bility Company were filed on
Florida document number <u>L 34000 474</u>	
This amendment is submitted to amend the follow	ving:
A. If amending name, enter the new name of t	he limited liability company here:
The new name must be distinguishable and contain the wor	ds "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicab	ole:
(Principal office address MUST BE A STREET	ADDRESS)
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	ox)
agent and/or the new registered office address	
Name of New Registered Agent:	MARVIN E. MOORE, MGR.
New Registered Office Address:	MARVIN E. MOORE, MAR.  13036 REGATTA DRIVE  Enter Florida street address  Lywson Florida = 34667  Zip Code
	Ayoson, Florida = 34667
New Registered Agent's Signature, if changing Re	

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>	Type of Action
Mge.	MARVIN E. MOORE	13036 REGATTA DR.	DAdd
		13036 REGATTA DR. LUNSON, Fl. 341667	Remove
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an effective date is listed, the date must be lote: If the date inserted in this block	specific and c	annot be prior to	date of filing o	r more than 90 da	ays after fili	ng.) Purs		
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record specifies a delayed effective da	te hut not a	n effective tin	ne ar l2:0 la :	n on the earlie	erofi(h)	The 90t	h day aft	er the
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Sign	IVLOO nature of a mo	ember or author	ized representa	ive of a member			<del></del>	
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