L11000016507

(Re	questor's Name)	
(Ad	dress)	•••
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	me)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

B. KOHR

OCT - 6 2011

EXAMINER



900212747269

11 OCT -6 AM II: 00

OE AN THE CONFIGNATIONS
TALL A HASSEE TLORIDA

RECEIVED

11 OCT -6 PM 1: 26

SECRETARY OF STATE OF CORPORATIONS



ACCOUNT NO. : 12000000195

REFERENCE : 936538

936538 430146:

AUTHORIZATION :

The second

COST LIMIT : \$ 25.00

ORDER DATE: October 5, 2011

ORDER TIME : 9:29 AM

ORDER NO. : 936538-010

CUSTOMER NO: 4301463

DOMESTIC AMENDMENT FILING

NAME: ALL US HOLDINGS LLC

EFFECTIVE DATE:

XX ARTICLES OF AMENDMENT
RESTATED ARTICLES OF INCORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Becky Peirce -- EXT# 2919

EXAMINER'S INITIALS:

FLEGE STRINGS

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

1001 6 AN 1.26

ALL US HOLDINGS LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

•		
r the abbreviation		
STE 101		
me of the new		
(Enter Florida street address) , Florida		
<u> </u>		

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 608, 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 the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member

Title	Name	Address	Type of Action		
MGRM	HUONG THI PHAM	19353 US HWY 19 N STE 101 CLEARWATER, FL 33764	B Add C Remove		
	:'. :		O Add O Remove		
			_O Add _O Remove		
			O Add O Remove		
	<u> </u>		_C Add _C Remove		
			_C Add _C Remove 		
D. If amendin	g any other information, enter change(s) here: (Attach additional sheets, if necessary.)	_		
. <u></u>			_		
Dated	c + 5, 20	11.	-		
<u> </u>	Signature of a member or authorized representative of a member On Inony Control Typed or printed name of signee				
Page 2 of 2					

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Filing Fee: \$25.00