M08000004295

(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:

L. SELLERS

SEP 22 2010

EXAMINER

Office Use Only

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600185472026
09/20/10--01050--023 **25.00

FILED
10 SEP 20 PM 3:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Assurance Management LLC
Name of Foreign Limited Liability Company

Dear Sir or Madam:

The enclosed Affidavit by Foreign Limited Liability Company to Change Manager(s) or Managing Member(s) and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Ben McCreary
Name of Person

Assurance Management LLC
Firm/Company

10400 NW 33rd Street #290
Address

Miami, FL 33172
City/State and Zip Code

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

For further information concerning this matter, please call:

Racquel Parker at (800) 670-1015 x 727
Name of Person Area Code and Daytime Telephone Number

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

☐ $25 Filing Fee
☐ $30 Filing Fee & Certificate of Status
☐ $55.00 Filing Fee & Certified Copy
☐ $60 Filing Fee, Certificate of Status & Certified Copy

CR2E123(8/07)

AFFIDAVIT BY FOREIGN LIMITED LIABILITY COMPANY TO CHANGE MANAGER(S) OR MANAGING MEMBER(S)

1. The name of the limited liability company as it appears on the records of the Florida Department of State is: Assurance Management LLC.

2. This entity was formed under the laws of: DELAWARE.

3. This entity was authorized to transact business in Florida on 9/23/08 and its Florida document/registration number is M08000004295.

4. The name and address of each manager or managing member is as follows:

Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGR	Benjamin McCreey 10400 NW 33rd Street #290 Miami, FL 33172

Required Signature: _____
Signature of Manager, Managing Member or Member

Filing Fee: $25

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

Assurance Management 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 9/23/08 and assigned Florida document number M08000004295

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 end with 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)

10400 NW 33rd St., Ste 290
Miami, FL 33172

Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

same as above

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: Ben McCrery

New Registered Office Address: 200 Ocean Drive, 7E
Enter Florida street address

Miami Beach, **Florida** 33139
City *Zip Code*

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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.

X
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
MGR	Kevin Blenman	200 Ocean Drive, 7E Miami Beach, FL 33139	☐ Add ☑ Remove
MGR	Ben McCrery	10400 NW 33rd St, Ste 290 Miami, FL 33172	☑ Add ☐ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Dated August 23rd, 2010.

Signature of a member or authorized representative of a member

Kevin Blenman
Typed or printed name of signee

Filing Fee: $25.00