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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ALL PROFESIONAL SERVICES 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:

LUCIA A TORRES

(Name of Person)

ALL PROFESIONAL SERVICES

(Firm/Company)

2100 SOUTH CONWAY RD I-4

(Address)

ORLANDO FL 32812

(City/State and Zip Code)

For further information concerning this matter, please call:

LUCIA A TORRES

(Name of Person)

at (407) 470-4166

(Area Code & 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)

STREET ADDRESS:
Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

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

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TALLAHASSEE, FLORIDA

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

ALL PROFESSIONAL SERVICES LLC

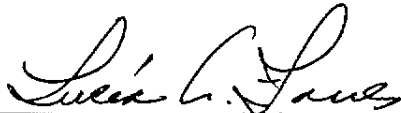
(Present Name)
(A Florida Limited Liability Company)

FIRST: The Articles of Organization were filed on JANUARY 3, 2005 and assigned document number L05000000624.

SECOND: The following amendment(s) to the Articles of Organization was/were adopted by the limited liability company:

ARTICLE I : THE NAME OF THE LIMITED LIABILITY COMPANY IS: ALL PROFESIONAL SERVICES LLC
CORRECT OR CHANGE TO: ALL PROFESSIONAL SERVICES LLC.

Dated 6 OF DECEMBER, 2005.



Signature of a member or authorized representative of a member

LUCIA A TORRES

Typed or printed name of signee

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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Filing Fee: \$25.00