L05000040214

| (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: |
| |
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| |

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COVER LETTER

| TO: Registration So Division of Cor | | ۶ | , . |
|--|--|---|--|
| | E SOLUTIONS GROUP, LLC | | · |
| SUBJECT: | Name of Lin | ited Liability Company | |
| The enclosed Articles of | Amendment and fee(s) are sub | emitted for filing. | |
| Please return all correspo | ondence concerning this matter | to the following: | |
| | Sarah J. Harnden | | |
| | | Name of Person | |
| | Dunlap & Moran | | |
| | | Firm/Company | |
| | PO Box 3948 | | |
| | | Address | |
| | Sarasota, FL 34230-3948 | | |
| | | City/State and Zip Code | |
| | jmoranstaff@dunlapmoran | | |
| Confirmation in Communication | | to be used for future annual report no | incation) |
| | concerning this matter, please c | | |
| Sarah J. Harnden | | at () 366-0115 Area Code Daytii | |
| Name o | of Person | Area Code Daytii | ne Telephone Number |
| Enclosed is a check for t | he 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) |
| <u>Mailing Addres</u> Registration | | <u>Street Address:</u> Registration So | ection |
| Division of C | | Division of Co | |
| P.O. Box 632 | 27 | The Centre of | |
| Tallahassee. | FL 32314 | 2415 N. Monro | oe Street, Suite 810 |

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| ALLIANCE SOLUTIONS GROU | | |
|--|--|---|
| (Name of the Lim | ited Liability Company as it now appears (A Florida Limited Liability Company) | on our records.) |
| The Articles of Organization for this Limited I | Liability Company were filed on $\frac{04/2}{2}$ | 2/2005 and assigned |
| Florida document number L05000040214 | _ . | |
| This amendment is submitted to amend the fol | llowing: | |
| A. If amending name, enter the new name | of the limited liability company her | <u>'e</u> : |
| The new name must be distinguishable and contain the | words "Limited Liability Company," the de- | signation "L.L.C." or the abbreviation "L.L.C." |
| Enter new principal offices address, if appli | cable: | |
| Principal office address MUST BE A STRE | ET ADDRESS) | |
| | | |
| | | |
| Enter new mailing address, if applicable: | <u></u> | - 06 - |
| Mailing address MAY BE A POST OFFICE | E BOX) | $\mathfrak{p}_{\mathbb{N}}$ ω . Let |
| | | Sign A M |
| | | <u> </u> |
| B. If amending the registered agent and/or | | cords, enter the name of the flew register |
| igent and/or the new registered office addr | ess here: | |
| Name of New Registered Agent: | John A. Moran | |
| New Registered Office Address: | 22 S. Links Ave., Ste. 300 | |
| | Enter Florid | la street address |
| | Sarasota | , Florida ³⁴²³⁶ |
| | 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> | Type of Action |
|---------------|------------------|--------------------|----------------|
| MGR | Michael Griffith | 700 Freeling Drive | = Add |
| | | Sarasota, FL 34243 | □Remove |
| | | | □Change |
| | | | □Add |
| | | | □Remove |
| | | | □Change |
| | | | □Add |
| | | ···· | □Remove |
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| | | | □Add |
| | | | □Remove |
| | | | |
| | | | □Add |
| | | | □Remove |
| | | | □Change |

| | The limited liability company is a Manager managed limited liability company. The name and address |
|-----------------|--|
| • | of the Manager is as follows: |
| | Michael Griffith, Manager |
| - | 700 Freeling Drive |
| | Sarasota, FL 34242" |
| - | |
| - | |
| - | |
| - | |
| - | |
| - | |
| - | |
| | |
| - | |
| - | |
| ef <u>e:</u> | ive date, if other than the date of filing: |
| | rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after led. |
| ed | August 17 . 2021 |
| | |

Filing Fee: \$25.00