

8/11/2021

Division of Corporations

L080000091103

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
AIM INSURANCE SERVICES LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

2021 AUG 11 PM 2:49

ALLAHASSEE, FLORIDA

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2021 AUG 11 PM 2:12
STATE
TALLAHASSEE, FLORIDA

Electronic Filing Menu

Corporate Filing Menu

Help

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

AIM INSURANCE SERVICES LLC

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

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FILED

The Articles of Organization for this Limited Liability Company were filed on 09/25/2008 and assigned
Florida document number L08000091103

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 contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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:

Marie Gelin

New Registered Office Address:

3200 N University Drive, #202

Enter Florida street address

Coral Springs

Florida 33065

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.

Marie Gelin
If Changing Registered Agent, Signature of New Registered Agent

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SECURITY
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Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated August 11, 2021

Signature of a member or authorized representative of a member

Marie Gelin

Typed or printed name of signee

Filing Fee: \$25.00