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(Address))
(Address)	,
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D. BRUCE

JUN 2 2010

EXAMINER

COVER LETTER

Division of Corporations					
SUBJECT: <u>AAA ACT 1 Auto In Surance Alegaly, UC</u> 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:					
Brent Baskan Name of Person					
AAA ACT 1 Auto In Surance Afterly, LLC					
1100 WEST OAKLAND BAYK Blut BAY Bb					
City/State and Zip Code City/State and Zip Code					
E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
Ben Bashan at (931) 537-1411 San					
Enclosed is a check for the following amount:					
\$25.00 Filing Fee \$ Certificate of Status Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed) S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)					

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

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

AAA ACT I AUto	InJurance	e Abency, LL	C	
(Name of the Limited (A	Liability Compar Florida Limited L	ny as it now appears on liability Company)	our records.)	-
The Articles of Organization for this Limited Lin Florida document number	ability Company	were filed on Nach	ober 35, 2009 an	d assigned
This amendment is submitted to amend the follo	wing:		•	
A. If amending name, enter the new name of	the limited liab	ility company here:		
The new name must be distinguishable and end with "L.L.C."	h the words "Limi	ted Liability Company,"	the designation "LLC" or	the abbreviation
Enter new principal offices address, if applica	able:	1100 West 0	AKlAND BANK L	3/W.1-BAY #6
(Principal office address MUST BE A STREE	TADDRESS)	Wilton /	Monors Florida	7 72.1
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	B <i>OX</i>)	1100 West O William M	AKland Park Bo Incrs Florida	33311 33311
B. If amending the registered agent and/or the new registered of	fice address her	<u>e</u> ;	records, enter the na	ne of the new
Name of New Registered Agent:		BASTIAN	SS	
New Registered Office Address:	1100 Wes.	TOAKlAND PARK Enter I	Solus BAY 6	
	WilTar	North S	, Florida Zip	33/1 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 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

Page 1 612

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 = Man MGRM = M	ager anaging Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
MK	AnThony Beugen	19380 Collins Arelle #1502 Sunny ISLES TREACH Flines	Add Remove
<u>M.B.</u>	Sharan Fentan	1935/ 120 AVENU HOTH AND MADE WAR MINISUM 553	Add Remove
<u>Mkk</u> n	Brent Bastian	1100 WEST OAKlAND PARK Blub AS WILTON MINES FORED 333	Add Remove
			Add Remove
			Add Remove
			Add Remove
	Sent Baition is TAKE	nge(s) here: (Attach additional sheets, if necessary. In f. Als Aury-Shif of To Evanu Blody, LLC	10
	T01	2010 .	TILED
Dated	Signature of a memb	per or authorized representative of a member	
	Brent 1	BAS HAD ed or printed name of signee	<u>. </u>

Page 2 of 2

Filing Fee: \$25.00