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SECRETARY OF STATE
ALLAHASSEE, FLORID

D. BRUCE FEB 07 2011 EXAMINEF

COVER LETTER

TO: Registration Section Division of Corporations		
OOBOXOT.	All Insure	
Name of Limited Liability Company		
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office	Change and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:		
Norma Hurry		
Name of Person		
All Insure Firm/Company	SECRE SALLAN	
8029 Cooper Creek Blvd. #101 Address	EB - 4 PM Z AHASSEE, FU	
University Park, FL 34201 City/State and Zip Code	ORIO A	
norma@normahurry.com E-mail address: (to be used for future annual report notification)	lon)	
For further information concerning this matter, ple	ease call:	
Norma Hurry at (at (941) 359-1700 Area Code & Daytime Telephone Number	
Name of Person 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		

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

Name of the limited liability company:	All Insure	
2. (a) Principal office address of limited liability company	8029 Cooper Creek Blvd. #101	
(Note: MUST BE STREET ADDRESS)	University Park, FL 34201	
(b) Mailing address of limited liability company:	8029 Cooper Creek Blvd. #101	
(Note: MAY BE POST OFFICE BOX)	University Park, FL 34201	
August 4, 201	L10000081848	
3. Date of filing/registration in Florida	4. Document number	
5. (a) Registered Agent and Registered Office shown on	the records of the Florida Dept. of State:	
Registered Agent:	Allan Hurry	
Registered Office Address:	8029 Cooper Creek Blvd 3101	
	University Park, FL. 3420 Fo	
(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:		
NEW Registered Agent:	Norma Hurry	
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	8029 Cooper Creek Blvd. #101	
MACGA BE A BORNE A GIRLEY TIDENCESS	University Park ,FL34201	
If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company. Signature of a member or authorized representative of a member		
Norma Hurry Printed or typed name of signee	_	
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the pround I am familiar with and accept the obligations of my po Chapter 608, F.S. Or, if this document is being filed to me address, I hereby confirm that the limited liability company	gree to act in this capacity. I further agree to oper and complete performance of my duties, sition as registered agent as provided for in rely reflect a change in the registered office y has been notified in writing of this change.	
Signature of Registered Agent Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314		

FILING FEE: \$25.00

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