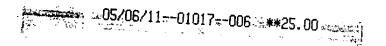
L110000021074

	(Requestor's Name)
	(Address)
-	(Address)
	(City/State/Zip/Phone #)
PICK-UF	P WAIT MAIL
	(Business Entity Name)
	(Document Number)
Certified Copies	Certificates of Status
Special Instructions	s to Filing Officer.
	A. LUNT
	MAY 10 2010
	EXAMINER

Office Use Only



400207289414





COVER LETTER

TO: Registration Division of C	Section forporations		
SUBJECT:	All America	ın Installations LLC	
		ited Liability Company	
The enclosed Articles	of Amendment and fee(s) are su	bmitted for filing.	
Please return all corres	pondence concerning this matte	r to the following:	
		Bruce Campbell Name of Person	
		Name of Ferson	
		Firm/Company	201 AL
		2018 Wiley Street Address	OULHAY -
			ASS.
		Hollywood FI 33020	1,1
		City/State and Zip Code	FLORIES I
	E-mail address: (to be used for future annual report notification	
For further information	concerning this matter, please	call:	
	ay Needelman	4t ()	3-5040
Name	e of Person	Area Code & Daytime Tel	ephone 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)
Regis	LING ADDRESS: stration Section	STREET/COURIER A	
	sion of Corporations Box 6327	Division of Corporation Clifton Building	ns
Talla	hassee, FL 32314	2661 Executive Center	Circle

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

All American In:				
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears o Liability Company)	n our records.)		
. The Articles of Organization for this Limited Liability Company	were filed on	2/18/11	and assigned	
Florida document numberL11000021074				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liab	ility company here:			
The new name must be distinguishable and end with the words "Limi"L.L.C."	ited Liability Company,	" the designation "	CIC" or the abbreviation	
Enter new principal offices address, if applicable:	2018 Wiley Stre	et	MARTINE NAME OF THE PARTY OF TH	
(Principal office address MUST BE A STREET ADDRESS)	Hollywood Fl	į		
	33020			
Enter new mailing address, if applicable:	2018 Wiley Stree	5		
(Mailing address MAY BE A POST OFFICE BOX)	Hollywood FI	,, , , , , , , , , , , , , , , , , , ,	· · · · · · · · · · · · · · · · · · ·	
	33020			
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her Name of New Registered Agent: New Registered Office Address:	<u>e</u> :	records, enter		
·	- CV	, Florida	71 6 1	
	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 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

If amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR ≜ Manager

. 			[Add
			Remove
			Add Remove
,			Affd Remove
			Add Remove
<u> </u>			Add Remove
,	····		Add
If amendir	g any other information, enter chan	ge(s) here: (Attach additional sheets, if necessary.)	_
			_
ited	Bruce R. Bruce R.		_

Page 2 of 2

Filing Fee: \$25.00