## L1100006283Z

Office Use Only



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## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: Action 1 Inspections LLC  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:
Action 1 Inspections LLC
Action 1 Inspections LLC
16363 Fern Dr
City/State and Zip Code  in fo @ action I inspections. com
E-mail address: (to be used for future annual report notitication)
For further information concerning this matter, please call:
Tuan Nation of Person at (954), 243 - 3358  Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
☐ \$25.00 Filing Fee Certificate of Status  Certificate of Status  Certified Copy (additional copy is enclosed)  □ \$60.00 Filing Fee, Certified Copy (additional copy is enclosed)

Mailing Address:
Registration Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Action 1 Insper	ctions LLC		
(Name of the Limited Liabil (A Florid	ity Company as it now appears on a Limited Liability Company)	our records.)	
The Articles of Organization for this Limited Liability (Florida document number	Company were filed on/0	0/15/12	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the lin	ited liability company here:		
The new name must be distinguishable and contain the words "Lir Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADD			
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registere agent and/or the new registered office address here:  Name of New Registered Agent:  New Registered Office Address:	Tugn Naranjo 16363 Fern 1 Enter Florida: Weston City		
	City		гар Став

## 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>	Address	Type of Action
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			□Change
			Remove
			□ Change
			□Add
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If an effe Note: I	ctive date is listed, the	than the date of the date must be specified in this block does on the Department	ic and cannot be p not meet the ap	plicable statutor	ng or more than 90 y filing requiren	(optional) days after filing.) Punents, this date wil	rsuant to 605.0207 I not be listed as
ne record ord is file	specifies a delaye	d effective date, bu	и not an effectiv	ve time, at 12:01	a.m. on the ear	ier of: (b) The 9	Oth day after the
Dated_	Juna	17	~ 20	24	t entative of a memb		
		Signature	of a member or a	authorized represe	ntative of a memb	er	
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Filing Fee: \$25.00