L12000000195

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M. MILLIGAN AUG 23 2018 BAUG 20 OH 21 00

AUG 23 PH 2:

COVER LETTER

TO: Registration Sec Division of Corp				
	oad Service LLC			
SUBJECT:	Name of Lim	ited Liability Company	<u> </u>	
The enclosed Articles of A	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspor	idence concerning this matter	to the following:		
	NANCY J MCINTOSII			
		Name of Person	 _	
	ALL ABOUT ROAD SERVICE LLC			
		Firm/Company		
	6224 ANGUS VALLEY I	OR .		
		Address		
		City/State and Zip Code		
	WESLEY CHAPEL FL 33			
	·	to be used for future annual report notifi	cation)	
For further information co	ncerning this matter, please co	all:		
NANCY J MCINTOSH		813 713-5058		
Name of	Person	Area Code Daytime	Telephone Number	
Enclosed is a check for the	e 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)	

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

2010 AUG 23 PH 2: 03

SECRETARY OF STATE TO LARGE THOSES

ALL ABOUT ROAD SERVICE LLC	
(Name of the Limited Liability Company (A Florida Limited Liabi	It now appears on our records.) Ity Company)
The Articles of Organization for this Limited Liability Company were Florida document number L12000020195 This amendment is submitted to amend the following:	re filed on FEBRUARY 10, 2012 and assigned
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 C	ompany," the designation "LLC" or the abbreviation "L.L.C."
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 registered agent and/or the new registered office address here:	address on our records, enter the name of the new
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	, Florida
	City Zip Code
New Registered Agent's Signature, if changing Registered Agent:	
I hereby accept the appointment as registered agent and agree to provisions of all statutes relative to the proper and complete perp accept the obligations of my position as registered agent as prov being filed to merely reflect a change in the registered office add company has been notified in writing of this change.	formance of my duties, and I am familiar with and ided for in Chapter 605, F.S. Or, if this document is

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

*,

Title	Name	Address	Type of Action
MGR	NANCY J MCINTOSH	6224 ANGUS VALEY DR WESLEY CHAPEL FL 33544	
			Remove
			Change
MGR	THEODORE J LAVALLE	6224 ANGUS VALLEY DR WESLEY CHAPEL FL 33544	
			Remove
			Change
			Add
			C Remove
			Change
			Remove
			☐ Change
			Remove
			Change
			□ Add
			□ Remove
			Change

If amending	any other information, enter change(s) here: (Attach additional sheets, if necessary.)	_
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Note: If the	te, if other than the date of filing:	605.0207 (3)(b) listed as the
the record s) The 90th	pecifies a delayed effective date, but not an effective time, at $12:01\ a.m.$ on the eaday after the record is filed.	rller of:
Dated	8/22/2018	
	Nanoj McInter	2011 A
	Signature of a member or authorized representative of a member	AUG
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Filing Fee: \$25.00