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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

(Business Entity Name)

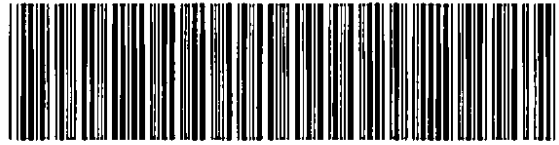
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2019. 12 PM 3:02

Amend

SEP 23 2019

I ALBRITTON

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: ALL-ASHORE, 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:

Cory S. Carano, Esq.

Name of Person

Kelley & Grant, P.A.

Firm/Company

370 Camino Gardens Blvd, Ste. 301

Address

Boca Raton, FL 33432

City/State and Zip Code

butchb40@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Charles Blanchard

at (772)

626 1595

Name of Person

Area Code

Daytime Telephone 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)

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**

ALL-ASHORE, LLC.

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 08/09/2012 and assigned
Florida document number L12000103292.

This amendment is submitted to amend the following:

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 Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

7908 SE Arrance St

(Principal office address MUST BE A STREET ADDRESS)

Hobe Sound, FL 33445

Enter new mailing address, if applicable:

7908 SE Arrance St

(Mailing address MAY BE A POST OFFICE BOX)

Hobe Sound, FL 33445

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

Charles Blanchard

New Registered Office Address:

7908 SE Arrance St

Enter Florida street address

Hobe Sound

City

Florida 33445

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 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>	<u>Address</u>	<u>Type of Action</u>
AR	Floridian Management Group	6056 SE Federal Hwy	<input type="checkbox"/> Add
		Stuart, FL 34997	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Charles Blanchard	7908 SE Arrance St	<input checked="" type="checkbox"/> Add
		Hobe Sound, FL 33445	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

Handwritten signature/initials

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Amendment of FEI/EIN Number to: 80-0845006

[illegible]

8.29.19

E. Effective date, if other than the date of filing: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated August 29, 2019



Signature of a member or authorized representative of a member

Cory S. Carano, Esq.

Typed or printed name of signee

U.N.B.S.T.