12000104596

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COVER LETTER

Division of	Corporations
ALL IN	ONE CONCRETE AND BLOCK, LLC
SUBJECT:	Name of Limited Liability Company
The enclosed Articles	s of Amendment and fee(s) are submitted for filing.
Please return all corre	espondence concerning this matter to the following:
	Richard Harris
	Name of Person
	All in One Concrete and Block
	Firm/Company
	23920 NW 27th Street
	Address
	Morriston, Florida 32668
	City/State and Zip Code
	allinoneconcretellc@gmail.com E-mail address: (to be used for future annual report notification)
For further information	on concerning this matter, please call:
Richard Harris	352 219-5799
Nar	ne of Person at () Area Code Daytime Telephone Number
Enclosed is a check f	or the following amount:
□ \$25.00 Filing Fee	E \$30.00 Filing Fee & ☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

TO:

Registration Section

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 IN ONE CONCRETE AND BLOCK, 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 $\frac{8/13/2012}{1}$ _ and assigned Florida document number L12000104596 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 "LLC." 23920 NW 27th Street Enter new principal offices address, if applicable: Morriston, Florida 32668 (Principal office address MUST BE A STREET ADDRESS) 23920 NW 27th Street Enter new mailing address, if applicable: Morriston, Florida 32668 (Mailing add<u>ress MAY BE A POST OFFICE BOX)</u> 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: New Registered Office Address: Enter Florida street address

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.

Cirv

If Changing Registered Agent, Signature of New Registered Agent

_, Florida

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
AMBR	Starr, Hollie	8119 SW 57th Place	
		Gainesville, Florida 32608	Remove
			Change
AMBR	Brigham, Marika	23920 NW 27th Street	■ Add
		Morriston, Florida 32668	Remove
			Change
			☐ Remove
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an effec <u>ote:</u> If	e date, if other than the date of filing: (optional) tive 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 the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be not's effective date on the Department of State's records.	605.0. listed	207 as
reco	rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the ea loth day after the record is filed.	ırlier	O ¹
nted _	7/6/18 2018		
	- Annother and the second of t		
	Signature of a member or authorized representative of a member		

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Filing Fee: \$25.00