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COVER LETTER

Division of Corpo							
ALL-N	-1, LLC .						
SUBJECT:	Name of Limited Li	ability Comp	any				
The enclosed Articles of Ar	mendment and fee(s) are submitted	d for filing.					
Please return all correspond	ence concerning this matter to the	following:					
	Donald H. Moo	re, Jr.					
		Name of Perso	n	_			
•	ALL-N-1, LLC	·					
		Firm/Compan	у				
	P.O. Box 6712						
		Address					
	Seffner, FL 33						
	City ALL_N_1LLC@yahoo	/State and Zip	Code				
	E-mail address: (to be us		nnual report notificatio	n)	20		
For further information con	cerning this matter, please call:					河马州平	• • ;
Donald H. M	oore, Jr.	813	689-1593		122	1Y 28	,
Name of P	erson	Are	a Code & Daytime Tele	phone Number			Ţ
Enclosed is a check for the	following amount:				768907. 3941S	PH 12: 53	, , , , , , , , , , , , , , , , , , ,
■ \$25.00 Filing Fee	□\$30.00 Filing Fee & □ Certificate of Status	\$55.00 Filing Certified Co (additional)		□\$60,00 Fili Certificat Certified (additional	e of Statu Copy	us &	ed)
Registrati Division P.O. Box	G ADDRESS: on Section of Corporations 6327 ee, FL 32314	Re Di Cli	REET/COURIER Agistration Section vision of Corporation lifton Building	s			

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

· ALL-N-1, LLC		
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number L13000045095	were filed on March 26, 2013	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	pility company here:	
The new name must be distinguishable and end with the words "Lim"L.L.C."	ited Liability Company," the designation '	'LEC" or the abbreviation
Enter new principal offices address, if applicable:		77
(Principal office address MUST BE A STREET ADDRESS)		(a) (b) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c
Enter new mailing address, if applicable:	All-N-1, LLC P.O. Box 6712	PH 12: 54
(Mailing address MAY BE A POST OFFICE BOX)	Seffner, FL 33583	
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> :	
	Enter Florida street ad	ldress
	, Florida	Zip Code
	City	zip Coae

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 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 MGRM = Managing Member

Title.	<u>Name</u>	<u>Address</u>	Type of Action
MGRM	Donald H. Moore, Jr.	504 N. Parsons Ave.	Add
		Brandon, FL 33510	Remove
			Add Remove
		For Control of the Co	
			PM 2 5 Add Remove
			Add
			Remove

D. It amending any other information, enter change(s) here: (Attach adaitional sheets, if necessary.)	
Address of MGRM Ronald Vos has been changed t	0:
2814 Gallagher Road	
Dover, FL 33527	
	—
Dated May 22 2013	
A Mal	
Signature of a member or authorized representative of a member	
Donald H. Moore, Jr., MGRM	
Typed or printed name of signee	

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Filing Fee: \$25.00

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