L13000070608

(Re	questor's Name)	
(Add	dress)	
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05/28/13--01024--027 **25.00

C. LEWIS

MAY 2 9 2013

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: All Property Solutions, 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:

Mark Wilson

Name of Person

Firm/Company

PO Box 1009

Address

West Palm Beach, FL 33402

City/State and Zip Code

mwilson@allpropsolutions.com

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

For further information concerning this matter, please call:

Mark Wilson

Name of Person

{#(}201\693-5719

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

FILED

13 MAY 28 PM 3: 02

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

(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on 5/14/2013 Florida document number L13000070608 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 end with the words "Limited Liability Company," 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 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 , Florida

New Registered Agent's Signature, if changing Registered Agent:

All Property Solutions, LLC.

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.

City

Zip Code

or Managing Member being added or removed from our records: MGR = Manager FILED MGRM = Managing Member 13 NAY 28 PM 3: 02 **Title Name Address Type of Action** PO Box 1009 E. FLORIDA Susan C Wilson West Palm Beach, FL 33402 Mark Wilson PO Box 1009 West Palm Beach, FL 33402 Remove Remove Remove

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager

D. If amending any other information, enter change	s) here: (Attach additional sheets, if necessary.)
	FILED
	13 MAY 28 PM 3: 02
	TABLARASSE. FLORIDA:
Dated May 24 2013	3
Maller C	Wilson
	r authorized representative of a member
Susan C Wilson	
Typed or	printed name of signee

Page 3 of 3

Filing Fee: \$25.00