L14000035662

(Re	equestor's Name)	
(Ac	idress)	
(Ac	dress)	
(Ci	ty/State/Zip/Phone	: #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Ďo	ocument Number)	····
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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TO:		stration Secti sion of Corpo			
SIIB IE4	СТ. '	Always In Mo	otion (A.I.M.) LLC		
зовје	C1; _		Name of Limite	ed Liability Company	
The enc	losed	Articles of Ar	nendment and fee(s) are subm	itted for filing.	
Please re	eturn a	all correspond	ence concerning this matter to	the following:	
			Marci Whitehurst		
				Name of Person	·····
Always In Motion (A.I.M.) LLC					
			Firm/Company		
			360 Kiwanis Circle		
				Address	
			Chuluota, FL 32766		
				City/State and Zip Code	
mdwhitehurst21@gmail.com					
					tion)
For furth	ner int	formation con	cerning this matter, please call	!:	
Marci V	Vhiteh	urst		407 415-3409 at ()	
		Name of P	erson	Name of Limited Liability Company ment and fee(s) are submitted for filing. concerning this matter to the following: ci Whitehurst Name of Person ays In Motion (A.I.M.) LLC Firm/Company Kiwanis Circle Address Juota, FL 32766 City/State and Zip Code hitehurst21@gmail.com E-mail address: (to be used for future annual report notification) ag this matter, please call: at (407) 415-3409 Area Code	
Enclose	d is a	check for the	following amount:		
\$25.	.00 Fi	ling Fee	□ \$30.00 Filing Fee & Certificate of Status		

MAILING ADDRESS:

TO:

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



FLORIDA DEPARTMENT OF STATE Division of Corporations

May 18, 2016

MARCI WHITEHURST 360 KIWANIS CIRCLE CHULUOTA, FL 32766

SUBJECT: ALWAYS IN MOTION (A.I.M.) L.L.C

Ref. Number: L14000035662

We have received your document for ALWAYS IN MOTION (A.I.M.) L.L.C. However, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$25.00. Your document will be retained in our pending file. Please return a copy of this letter to ensure that your check is properly credited.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Letter Number: 416A00010568

Yasemin Y Sulker Regulatory Specialist II

www.sunbiz.org

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

Always In Motion (A.I.M.) LLC		
(<u>Name of the Limited Liability Compa</u> (A Florida Limited l	any as it now appears on our Liability Company)	records.)
The Articles of Organization for this Limited Liability Company Florida document number L14000035662	were filed on 02/28/2014	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	oility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation	n "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	360 Kiwanis Circle	
(Principal office address MUST BE A STREET ADDRESS)	Chuluota, FL 32766	
Enter new mailing address, if applicable:	360 Kiwanis Circle	AUG 25
(Mailing address MAY BE A POST OFFICE BOX)	Chuluota, FL 32766	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		ecords, enter the name of the ne
Name of New Registered Agent: Marci Whitehu	rst	
New Registered Office Address: 360 Kiwanis Ci	ircle	
	Enter Florida street	address
Chuluota		, Florida <u>32766</u>
	City	Zip Code

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, <u>enter the title, name, and address of each person being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
	Corinne Ann White	360 Kiwanis Circle, Chuluota, FL 32766	□ Add
			■ Remove
			Change
			□ Remove
			☐ Change
			Add 65 Remove
			25 Change Lad 7
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lote: If the date inserted in this	must be specific and cannot be prior to date of	(optional) f filing or more than 90 days after filing.) Pursuant utory filing requirements, this date will not b	to 605.0207 e listed as
e record specifies a delay The 90th day after the r		fective time, at 12:01 a.m. on the ϵ	earlier of
ated May 6	, 2016		
	- 0	1-16,000	

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00