L14000164578

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



800290289198

09/16/16--01020--024 **25.00

16 SEP 16 PH 8: 58

SEP 1 9 2016 Y SULKER

COVER LETTER

TO:	Registration Se Division of Cor			
eum u		ALL IN ON	NE REPAIRS LLC	
SUBJ	EC1:	Name of Lim	ited Liability Company	
The er	nclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please	return all correspo	ondence concerning this matter	to the following:	
	·		DAYRON BORRAS	
			Name of Person	
		ALI	. IN ONE REPAIRS LLC	
			Firm/Company	····
			20775 SW 129th PL	
			Address	
			MIAMI, FL 33177	
		_	City/State and Zip Code	
			NEREPAIR001@GMAIL.COM to be used for future annual report notif	ication)
For fw	rther information c	oncerning this matter, please co	·	
* DAYRON BORRAS		786 351-1803		
	Name o	f Person	Area Code Daytime	Telephone Number
Enclos	sed is a check for the	he following amount:		
\$2	5.00 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 IN ONE REPAIRS LL	.C
(Name of the Limited Liability Company as it no (A Florida Limited Liability Co	ow appears on our records.) ompany)
The Articles of Organization for this Limited Liability Company were file	ed on10/22/2014 and assigned
Florida document numberL14000164578	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability com	pany here:
The new name must be distinguishable and contain the words "Limited Liability Compa	ny," 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)	(**
	5.5
B. If amending the registered agent and/or registered office add	lress on our records, enter the name of the
registered agent and/or the new registered office address here:	
Name of New Registered Agent:	70 · ·
New Registered Office Address:	
	Enter Florida street address
	. Florida
City	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>	Address	Type of Action
AMBR	PEDRO BORRAS	20775 SW 129th PL	Add
		MIAMI FL 33177	_ Remove
			☐ Change
			Add
			□ Remove
			Change
			Remove
			☐ Change
<u></u>			200 Po Add Po
			Remove
			□ Add
		 	□ Remove
			□ Change
			Add
			☐ Remove
			☐ Change

-					····	·····	 	· · · · · · · · · · · · · · · · · · ·		_
	. '									_
										
										_
										
										_

										_
			· · · · · · · · · · · · · · · · · · · 							
										-
<u> =.</u>								<i>:</i> -		_
								<u>;~`</u>	<u> </u>	
								<u>.</u>	3S.	
								S. 3.	16	.*
								لد. 	PA	7 701
Effective d	date, if other than	the date of f	iling:				(option	naffi :	c .(_	P nu
Note: II th	date, if other than e date is listed, the date ne date inserted in th s effective date on the	is block does i	not meet tr	ne applicabl	late of filing o	r more than 90 iling requiren	days after fi	iling.) Purs	ໝື້ນກີ to 6 not be li	05.0207 sted as
iocument's				but not a	n effectiv	e time, at	12:01 a.	m. on t	he ear	lier of
e record	l specifies a dela th day after the	record is fil								
e record The 90t			20	016						
e record The 90t	th day after the		,	016	(4 1/2					
ne record	th day after the	10	D	301	W					
ne record The 90t	th day after the	10	D	301	ed representa	live of a memb	er			

Page 3 of 3

Filing Fee: \$25.00