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(Requ	uestor's Name)	<u></u>
(Addr	ess)	
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(City/:	State/Zip/Phone #)
PICK-UP	☐ WAIT	MAIL
(Busi	ness Entity Name)	
(Docu	ument Number)	
Certified Copies	Certificates of	Status
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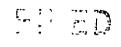
COVER LETTER

Registration Section Division of Corporations

TO:

SUBJECT:A	djuster Pro's LLC		
NOBSECT:	Name of Lim	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
		Gilberto Lopez Name of Person	
		Name of Person	
		Adjuster Pro's LLC	
		Firm/Company	
	125	55 Orange Drive, #4172	
		Address	
		Davie, FL 33330	<u> </u>
		City/State and Zip Code	
	E-mail address: (gil@adjpros.com to be used for future annual report not	fication)
For further information c	oncerning this matter, please c	all:	
0.11			
Gilberto Name o	Lopez f Person	at (<u>305</u>) <u>494-298</u> Area Code Daytim	9 te Telephone Number
Enclosed is a check for the	ne 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)
Registi Divisic P.O. B	ING ADDRESS: ration Section on of Corporations ox 6327 ussee, FL 32314	STREET/COURI Registration Section Division of Corporal Clifton Building 2661 Executive Ce Tullahassee, FL 32	on rations enter Circle

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



2019 122 11 124 11 24

(<u>Name of the Limited Liability Company a</u> (A Florida Limited Liab	·		• ••
The Articles of Organization for this Limited Liability Company we	re filed on	1-5-2016_	and assigned
Florida document number <u>L16000001447</u> .			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liability	company he	ere:	
Adjuster Pros Public Adj			· · · · · · · · · · · · · · · · · · ·
The new name must be distinguishable and contain the words "Limited Liability C	Company," the d	esignation "LLC" or t	he abbreviation "L.L.C."
Enter new principal offices address, if applicable:		12555 Oran	ge Drive
(Principal office address MUST BE A STREET ADDRESS)		#4172	
_		Davie, FL	33330
Enter new mailing address, if applicable:		12555 Orang	ge Drive
(Mailing address MAY BE A POST OFFICE BOX)		#4172	
		Davie, FL	33330
B. If amending the registered agent and/or registered office registered agent and/or the new registered office address here: Name of New Registered Agent:	e address on	our records, <u>er</u>	iter the name of th
New Registered Office Address:			
New Registered Office Address.	Enter Florida street address		
		PL2-1	
		, Fioria:	Zip Code

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 adde or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
			🗖 Add
			☐ Remove
			☐ Change
			□ Remove
			Change
		Add	
		 	Remove
			Change
		Remove	
			Change
			☐ Change
			Remove
			□ Change

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 =	
(If an effec <u>Note:</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 605.020 if the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed and it's effective date on the Department of State's records.
	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of 00th day after the record is filed.
Dated	June 12, 2019 . 12:01 AM .
	M. A. //
	(VIII)

Page 3 of 3

Filing Fee: \$25.00