Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CONTRACTORS REPORTING SERVICES, INC.

Account Number : I20050000099 Phone : (813)932-5244 Fax Number : (813)932-3782

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN:-BENEFIT INSURANCE SERVICES, LLC

Certificate of Status	0
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Corporate Filing Menu

Help

TO:

Page: 2 of 5

COVER LETTER

	Registration Sec Division of Corp			
SUBJEC'	T: BENEFIT I	NSURANCE SERVICES, LLC	:	
.,		Name of Lin	nited Liability Company	
The enclo	sed Articles of A	Amendment and fee(s) are sub	omitted for filing.	
Please reti	urn all correspor	ndence concerning this matter	to the following:	
		ROMAN ALBANO		
		* *	Name of Person	
		CONTRACTORS REPORTIN	NG SERVICE, INC	
			Firm/Company	
		23110 SR 54, PMB 336	5	
			Address	
		LUTZ, FL 33549		
			City/State and Zip Code	
		info@activatemylicen E-mail address: (ise.com to be used for future annual report no	otification)
For furthe	r information co	ncerning this matter, please c	all:	
ROMAN A	LBANO		at (813) 932-5244	
	Name of	Person	Area Code Dayti	me Telephone Number
Enclosed i	is a check for the	e following amount:		
⊠ \$25.0	0 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)
S	Iailing Address	<u>:</u>	Street Address;	

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Registration Section
Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

From: Roman Albano

Fax. +18134457083

To: LLC Amendments Docusign Envelope ID: 4CE4FD95-0A87-4244-ADA4-3AF55E1EF931

Fax: +18506176383

Page: 3 of 5

12/09/2024 2:22 PM

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ARTICLES OF AMENDMENT

ANTICLES OF AMENDMENT
ТО
ARTICLES OF ORGANIZATION
OF

BENEFIT INSURANCE SERVICES, LLC		
(Name of the Limited Liability Com (A Florida Limite	ipany as it now appears on d Liability Company)	our records.)
The Articles of Organization for this Limited Liability Compar Florida document number L16000172443	ny were filed on 09/15	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	ability company here:	
The new name must be distinguishable and contain the words "Limited Lia	ibility Company," the design	nation "L.L.C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		,
(Principal office address MUST BE A STREET ADDRESS)		; • C;
		7 5 F
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
		: . C
B. If amending the registered agent and/or registered offic agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address:		
	Enter Florida s	treet address
·	City	, Florida Zip Code
New Registered Agent's Signature, if changing Registered Agen	•	гр сове
I hereby accept the appointment as registered agent and agorovisions of all statutes relative to the proper and comple accept the obligations of my position as registered agent a being filed to merely reflect a change in the registered officeompany has been notified in writing of this change.	— gree to act in this capo te performance of my s provided for in Chap	duties, and I am familiar with and oter 605, F.S. Or. if this document is
<u>It Cr</u>	nanging Registered Agent.	Signature of New Registered Agent

or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
AMBR	ALBANO, JOY	2513 RUSTIC OAKS DR LUTZ, FL 33559	□Add
			⊠ Remove
			Change
AMBR	ALBANO, MELISSA	2513 RUSTIC OAKS DR LUTZ, FL 33559	⊠Add
			Remove
			□Change
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			Remove
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an effective 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 605.0207 tote: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as occument's effective date on the Department of State's records. record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the Lis filed. ated 12/9/2024 Decußigned by.		
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