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(Re	equestor's Name)	
(Ad	dress)	
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D. BRUCE MAR 07 2017

COVER LETTER

Division of Co	rporations	•		
All In Au SUBJECT:	ction, LLC			
	Name of Lim	ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.		
Please return all correspondence	ondence concerning this matter	to the following:		
	Zuwar	nia Smith		
		Name of Person		
	All In Auc	tion, LLC		
Firm/Company 2312 Mayo Street				
		Address	<u> </u>	
	Hollywood, Fl 33020			
		City/State and Zip Code		
	Allinauction@gmail.com E-mail address: (1)	to be used for future annual report notifica	tion)	
For further information of	concerning this matter, please ca			
Zuwania Smith		954 496-2623	2017 MAR SECKET ALLAHA	To a second
Name o	of Person		elephone Number 1	
Enclosed is a check for t	he following amount:			
□ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	■ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy (additional copy is enclosed)	

MAILING ADDRESS: Registration Section **Division of Corporations**

TO:

Registration Section

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 Auction, LLC		
(<u>Name of the Limited Liability Com</u> (A Florida Limite	npany as it now appears on our records.) ed Liability Company)	
The Articles of Organization for this Limited Liability Compartion document number <u>L16000191764</u> .	ny were filed on October 17, 2016	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited li	ability company here:	
The new name must be distinguishable and contain the words "Limited Lis	ability Company," the designation "LLC" or the ab	breviation "L.L.C."
Enter new principal offices address, if applicable:	- · · · · · · · · · · · · · · · · · · ·	<u></u>
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	PO BOX 814356 Hollywood, FL 33081-4356	
B. If amending the registered agent and/or registered registered agent and/or the new registered office address h		the name of the new
Name of New Registered Agent:	ン	
New Registered Office Address:	<u> </u>	-< or • <u>•</u>
	, Florida	ā U
	City Sp.	Zfp/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
AR	John Rembert	2312 Mayo Street	Add
		Hollywood, Fl 33020	Remove
			□ Change
AMBR	Alexander Gordon	1290 NW 29th Way	Add
		Fort Lauderdale, Fl 33311	Remove
			☐ Change
AMBR	Zuwania Smith	2312 Mayo Street	
		Hollywood, FI 33020	□ Remove
			☐ Change
			Add TI
			Remove
			Change S
			B Aud
			Remove
			Change
			□ Add
			☐ Remove
			☐ Change

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If an e Note:	tive date, if other than the date of filing: ffective date is listed, the date must be specific and cannot be prior to date of filing or me If the date inserted in this block does not meet the applicable statutory filing ment's effective date on the Department of State's records.	(optional) ore than 90 days after filing.) Pursuant to g requirements, this date will not be	o 605.0207 (e listed as t
	ecord specifies a delayed effective date, but not an effective to e 90th day after the record is filed.	me, at 12:01 a.m. on the e	arlier of:
Dated	March 2 , 2017		
	78		
	Signature of a member or authorized representative		_

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Typed or printed name of signee

Filing Fee: \$25.00