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(Ad	dress)	
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(Cit	y/State/Zip/Phon	e #)
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## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: All Cutclooss unlimited LC
Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Case Caudill Name of Person
AMPRICAN SOCHWASH DBA PAURSEULINGUSA
3708 W International spedway BIND
Daytona Beach FL 32124 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Casey Caudill at 386 506 9748 Fig. 1886 Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\ \text{Certificate of Status} \text{Certified Copy} \\ \text{(additional copy is enclosed)} (additional c
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



September 3, 2019

CASEY CAUDILL AMERICAN SOFTWASH DBA PAVERSEALINGUSA 3708 W INTERNATIONAL SPEEDWAY BLVD DAYTONA BEACH, FL 32124

SUBJECT: ALL OUTDOORS UNLIMITED LLC

Ref. Number: L17000136627

We have received your document for ALL OUTDOORS UNLIMITED LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must be signed by a member or an authorized representative of a member.

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) 245-6050.

Letter Number: 219A00018093

Diane Cushing Senior Section Administrator

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Compa (A Florida Limited	any as it now appears on our r Liability Company)	ecords.)
The Articles of Organization for this Limited Liability Company Florida document number 1 17000 136027	were filed on <u>()</u>	3/17 and assigned
This amendment is submitted to amend the following:	the following:    Ame of the limited liability company here:   Ame	
A. If amending name, enter the new name of the limited liab	pility company here:	
The new name must be distinguishable and contain the words "Limited Liabi Enter new principal offices address, if applicable: Principal office address MUST BE A STREET ADDRESS)	3708 W In	ternational spealway Blu
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)	3708 W Inta Daytona Beal	inational speedury Blud
3. If amending the registered agent and/or registered o registered agent and/or the new registered office address her		cords, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street o	address
	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 Type of Action Title Name Address 1190 4th st mcclellan, Tickani L ocarge City, FL 32763 ox Remove ☐ Change Westcall cody A 1190 4th st ☐ Change auna Caudill, casey 3708 Interpotional speed BIVA Daytona Brach, - Remove FL 32124 ☐ Change □ Add ☐ Remove ☐ Change □ Add ☐ Remove ☐ Change ☐ Add ☐ Remove

☐ Change

). Įf <sub>a</sub> im	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
(If an c: Note:	tive date, if other than the date of filing:    S   G   G     Goptional
	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: a 90th day after the record is filed.
Dated	alglia.
	Signature of a member or authorized representative of a member
	Typed or printed name of signec

Page 3 of 3

Filing Fee: \$25.00