117000 167639

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



600341986756

03/16/20--01015--009 **25.00

SECRETARY or STATE TALLAHASSEE FLORID/

MAR 2 7 2020

COVER LETTER

Registration Section

TO:

Division of Corporations	,
SUBJECT: All Nations MISURO	71140 110
SUBJECT: HI MUTICIO HISUTO	f Limited Liability Company
, ame of	. Similar Submity Company
The enclosed Articles of Amendment and fee(s) are	submitted for filing.
Please return all correspondence concerning this ma	atter to the following:
۲	Coura Storey Name of Person
	Name of Person
All Nati	ons Insurance LLC Firm/Company
·	Firm/Company
2130 W	Brandon Blvd Suite 103
	Addiess
Brand	City/State and Zip Code
la va Oak	City/State and Zip Code
[(U)A(4'AY)A E-mail addr	hors insurcivice. Com ess: (to be used for future annual report notification)
For further information concerning this matter, plea	ase call:
Javra Storey	at (813) 548 0866
Name of Person	Area Code Daytime Telephone Number
Enclosed is a check for the following amount:	
☑ \$25.00 Filing Fee ☐ \$30.00 Filing Fee & Certificate of State	
Mailing Address:	Street Address: Registration Section
Registration Section Division of Corporations	Division of Corporations
P.O. Box 6327	The Centre of Tallahassee
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810
	Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ALL Northons A	ty Company as it now appears on our records.) Limited Liability Company)
The Articles of Organization for this Limited Liability C. Florida document number <u>L170001676</u>	Company were filed on $8/7/2017$ and assigned 6.39
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the lim	ited liability company here:
The new name must be distinguishable and contain the words "Lim	ited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDR	2130 W Brandon Blvd Suite 10. Brandon, Fl 33511
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	2130 W Brandon Both State 1 Brandon, FL 33511 35 5
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	d office address on our records, enter the name of the new register
Name of New Registered Agent:	
New Registered Office Address: 213	30 W Broundon Blvd Suite 103
	Brandon Florida 33511 City Zip Code
New Registered Agent's Signature, if changing Registered	d Agent:
	and agree to act in this capacity. I further agree to comply with omplete 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
			🗆 Add
			□Remove
			Change
			□Add
			□Remove
			□Change
			□Add
		A C	Remove
		ALLAHASSEELFLORIDA	Remove 2020 HR 16 Add Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change

						
	•					
		- ,,,				
						
	<u>_</u> _					
	<u> </u>					
	 .					
					Ā.E SE	2020
	-		- "	•	CRE LAH) HAR
					NA SS	
						 ;
					177 (C)	3
					IATE DRID	2: 26
				•	· •	
fective date, if other an effective date is listed, ote: If the date inserted becoment's effective date.	the date must be speced in this block doc	s not meet the app	for to date of filing licable statutory	or more than 90 days		
ecord specifies a delay is filed.	red effective date, b	out not an effective	e time, at 12:01 a	m. on the earlier o	f: (b) The 90th	day after tl
ued Harch	iith	2021	<u></u>			
<i>,</i> ,		Manialal	7_			

Filing Fee: \$25.00