118000043946

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(City/State/Zip/Phone #)
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S. YOUNG

COVER LETTER

то:	Registration Se Division of Cor				
CLID IE		AL ESTATE & CONSTRUC	TION SERVICES, 11.C		
SUBJE	UI:	Name of Lim	ited Liability Company		
The encl	losed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please re	eturn all correspe	ondence concerning this matter	to the following:		
		CLELA NICOLE VASQU	JEZ		
		ALL IN REAL ESTATE &	Name of Person & CONSTRUCTION SERVICES, L	I.C.	
	Firm/Company 840 MEADOWLAND DRIVE APT H Address NAPLES, FL 34108 City/State and Zip Code NICOLE@ALLINBUILDINGGROUP.COM				
			to be used for future annual report notifi	cation)	
For furth	ner information c	oncerning this matter, please ca	all:		
CLELA	NICOLE VASÇ	QUEZ	239 287-4145 at ()		
	Name o	f Person	Area Code Daytime	Telephone Number	
Enclosed	l is a check for th	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)	
	Registr Divisio P.O. Bo	NG ADDRESS: atten section on of Corporations ox 6327 issee, FL 53314	STREET/COURIE Registration Section Division of Corpora Clifton Building 2661 Executive Cen Tallahassee, FI. 323	tions ter Circle	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Company as it now (A Florida Limited Liability Cor	(Appears on our records.) upany)
The Articles of Organization for this Limited Liability Company were filed	on <u>02/19/2018</u> and assigned
Florida document number L18000043946	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability comp	any here:
ALL IN BUILDING GROUP, LLC	
he new name must be distinguishable and contain the words "Limited Liability Compan	y," the designation "LLC" or the abbreviation "LLC."
Principal office address MUST BE A STREET ADDRESS) ——————————————————————————————————	
Enter new mailing address, if applicable:	<u> </u>
Mailing address MAY BE A POST OFFICE BOX)	19
	23
 If amending the registered agent and/or registered office addressive addressive and/or the new registered office address here: 	ess on our records, enter the name of the
egistered agent and/or the new registered office address here.	
Name of New Registered Agent:	
New Registered Office Address:	
	nter Florida street address

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.

City

If Changing Registered Agent, Signature of New Registered Agent

Zip Code

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 = Mar AMBR = Aut	ager horized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
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			Change
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__ Change

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Vote: If the date inserted in	an the date of filing:
e record specifies a de The 90th day after th	elayed effective date, but not an effective time, at 12:01 a.m. on the earlier ne record is filed.
ated April	2nd 2019. L'Mitole Vasger
_ Clla	Signature of a member of authorized representative of a member

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Typed or printed name of signee

Filing Fee: \$25.00