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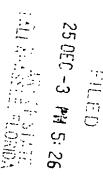
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## **COVER LETTER**

Registration Section Division of Corporations

TO:

	Insurance Services, LLC		
	Name of Lim	ited Liability Company	<del></del>
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	indence concerning this matter	to the following:	
	David Pennington		
		Name of Person	
		Firm/Company	
	1325 Plantation Oaks Dr S		
		Address	
	Jacksonville Beach, FL 32	250	
		City/State and Zip Code	
	penningtondin@outlook.com	n to be used for future annual report noti	diam'r
		·	nicanon)
or further information c	oncerning this matter, please ca	AU:	
David Pennington		225 485-8524 at ()	
Name o	f Person	Area Code Daytim	e Telephone Number
Enclosed is a check for the	ne following amount:		
■ \$25.00 Filing Fee	国 \$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)
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address: Registration Se Division of Con The Centre of T	rporations

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Pennington Insurance Services, LLC

(Name of the Lim	ited Liability Company as it no (A Florida Limited Liability Co	w appears on our reco impany)	<u>ords.</u> )
The Articles of Organization for this Limited		d on <u>06/24/2019</u>	and assigned
Florida document number 1.19000165997			
This amendment is submitted to amend the fo	llowing:		
A. If amending name, enter the new name	of the limited liability com	pany here:	•
Pennington Solutions, LLC			
The new name must be distinguishable and contain the	words "Limited Liability Compar	iy." the designation "L	LC" or the abbreviation "L.L.C."
Enter new principal offices address, if appli	icable:		
(Principal office address MUST BE A STRE	ET ADDRESS)		25
	<del></del>		F: 8
			1 L
Enter new mailing address, if applicable:			2: 0
(Mailing address MAY BE A POST OFFICE	<u> </u>		<u> </u>
	<del></del>		26
<b>B</b> 16			<b>&gt;</b> ₹
B. If amending the registered agent and/or agent and/or the new registered office addr	registered office address o ess here:	n our records, <u>ent</u>	er the name of the new registered
Name of New Registered Agent:	David Pennington		
New Registered Office Address:	1325 Plantation Oaks Dr	S	
riow regarded office reduction.		nter Florida street addi	ress
	Jacksonville Beach	.1	Florida 32250
	City	-	Zip Code
New Registered Agent's Signature, if changing	Registered Agent:		
I hereby accept the appointment as register provisions of all statutes relative to the pro- accept the obligations of my position as reg- being filed to merely reflect a change in the company has been notified in writing of this	per and complete perform gistered agent as provided gregistered office address,	ance of my duties, for in Chapter 602	and I am familiar with and 5, F.S. Or, if this document is

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

1011 -	Manager	
AMBR =	Authorized	Member

<u>Title</u>	Name	Address	Type of Action
MGR	Stephanie Pennington	1325 Plantation Oaks Dr S	<b>=</b> Add
		Jacksonville Beach. Fl. 32250	□Remove
			□Change
- <u>-</u>			🗆 🗖 🗛 dd
			□Remove
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		<del></del>	□Add
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			□Change

E. Effective date, if other than the date of filing:  (Optional)  (If an effective date is fisted, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 ( Note: If the date inserted in his blook does not meet the applicable statutory filing requirements, this date will not be listed as a document's effective date on the Department of State's records.  If the 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 coord is filed.  Dated October 19  5  2024	D. If amending any other in	iformation, enter o	chauge(s) here:	(Attach additional	sheets, if necessary.)	
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C. Effective date, if other than the date of filing:		<del></del>				<del></del>
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Dated October 19 2024	the record specifies a delayed ecord is filed.	effective date, but no	ot an effective tim	e. at 12:01 a.m. on th	e earlier of: (b) The	90th day after the
	Dated October 19	<u></u>	2024			
Signature of a member or authorized representative of a member		Signature of a	member or authori	zed representative of a	member	

Typed or printed name of signee