L19000 170035

(Requ	estor's Name)	
(Addre	ess)	
(Addre	ess)	
(City/S	State/Zip/Phone #/)
PICK-UP	☐ WAIT	MAIL
(Busin	ess Entity Name)	
(Доси	ment Number)	
Certified Copies	Certificates of	Status
Special Instructions to Fili	ing Officer:	





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10/23/20--01009--006 **30.00

[23] C. 23 [21] [22]

O SIMMONS 0EC 0 3 2020

COVER LETTER

TO: Registration Division of C	i Section Corporations		
	ALITY RESTORATION III LLC		
SUBJECT:	Name of Limi	ited Liability Company	
The enclosed Articles	of Amendment and fee(s) are sub-	mitted for filing.	
Please return all corre	espondence concerning this matter	to the following:	
	RICHARD HUGHES		
		Name of Person	
	ALL AMERICAN RESTO	PRATION COMPANY LLC	
		Firm/Company	
	541 BLUE HERON DRIV	E	
		Address	
	PANAMA CITY, FL 3240	14	
		City/State and Zip Code	
	RICH@A-IQUALITYRES		
		to be used for future annual report notifies	ation)
For further information	on concerning this matter, please ca	all:	
RICHARD HUGHES	5	850 520-3150 at ()	
Nan	ne of Person	Area Code Daytime T	elephone Number
Enclosed is a check fe	or the following amount:		
□ \$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
<u></u>		Street Address: Registration Secti Division of Corpo The Centre of Tal 2415 N. Monroe S Tallahassee, FL 3	Division of Corporations lahassee P.O. Box 6327 Street, Suite 810Tallahassee, FL 32314 2303

TO ARTICLES OF ORGANIZATION

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

A-1 QUALITY RESTORATION III LLC

company has been notified in writing of this change.

1000 20 914.20

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Li	ability Company	were filed on 28 JUN 2019	and assigned
Florida document number L19000170035	·		
This amendment is submitted to amend the follo	owing:		
A. If amending name, enter the new_name of	the limited liab	ility company here:	
ALL AMERICAN QUALITY RESTORATION LI			
The new name must be distinguishable and contain the w	ords "Limited Liabi	lity Company," the designation "LLC"	or the abbreviation "L.L.C."
Enter new principal offices address, if applications	able:		
(Principal office address MUST BE A STREE		N/A	
			
E-ton and modified address if applicables			
Enter new mailing address, if applicable:	DAV:	N/A	
(Mailing address MAY BE A POST OFFICE)	<u>BUX)</u>		
B. If amending the registered agent and/or r	egistered office	address on our records, enter t	the name of the new registered
agent and/or the new registered office address		uuui ess on our records, <u>enter t</u>	The factor of th
Name of New Registered Agent:	N/A	<u> </u>	<u> </u>
New Registered Office Address:	N/A		
New Registered Office Address.		Enter Florida street address	<u>-</u>
		. Flo	rida
		City	rida Zip Code
New Registered Agent's Signature, if changing I	Registered Agent:	1	
I hereby accept the appointment as registere provisions of all statutes relative to the prop- accept the obligations of my position as regi- being filed to merely reflect a change in the	er and complete stered agent as _j	performance of my duties, an provided for in Chapter 605, l	d I am familiar with and 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 AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address (131), 20 1111:30	Type of Action
		N/A	□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			🗀 Add
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N/A		
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		for 20 Million
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ctive date, if other than the date of filing:	OBER 16, 2020	(optional)
effective date is listed, the date must be specific and cannote: If the date inserted in this block does not meet the	be prior to date of filing or more the applicable statutory filing rec	han 90 days after filing.) Pursuant to 605.
iment's effective date on the Department of State's		1
	ctive time, at 12:01 a.m. on th	ne earlier of: (b) The 90th day after
	ective time, at 12:01 a.m. on th	ne earlier of: (b) The 90th day after
filed.		ne earlier of: (b) The 90th day after
filed. OCTOBER 16TH 202		ne earlier of: (b) The 90th day after
ord specifies a delayed effective date, but not an efficied. od OCTOBER 16TH 202		ne earlier of: (b) The 90th day after
filed.		ne earlier of: (b) The 90th day after
filed. od OCTOBER 16TH 202	h	
filed. od OCTOBER 16TH 202		