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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

(Business Entity Name)

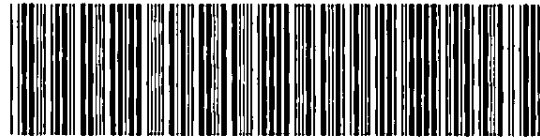
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2020 APR -2 PM 3:32
J. L. ED

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2020 APR -2 PM 11:17

FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 11, 2020

CHIP CARLTON
12115 SHADY FOREST DR
RIVERVIEW, FL 33569

SUBJECT: NSURE FLORIDA, LLC.
Ref. Number: L19000269728

We have received your document for NSURE FLORIDA, 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):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please indicate title for member listed on page 2(MBR, MGR, AMBR) and check box if you adding, removing or changing 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.

Octavia L Simmons
Regulatory Specialist II Supervisor

Letter Number: 120A00005324

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

NSureFL, LLC.

(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 Liability Company were filed on Jan 7th, 2020 and assigned
Florida document number L19000269728.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable: 14310 N. Dale Mabry Hwy. Suite 100
(Principal office address MUST BE A STREET ADDRESS) Tampa, FL 333618

Enter new mailing address, if applicable: 14310 N. Dale Mabry Hwy Suite 100
(Mailing address MAY BE A POST OFFICE BOX) Tampa, FL 33618

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: _____

New Registered Office Address: _____

Enter Florida street address

_____, Florida _____
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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
<u>AMBR</u>	<u>Lindsey Fowkes</u>	<u>14310 N. Dale Mabry Hwy Suite 100</u>	<input checked="" type="checkbox"/> Add
		<u>Tampa, FL 33618</u>	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Changing membership to add additional owner/member.

Currently: Chip Carlton 100%

Amended Change to be:

Chip Carlton 50% Member Owner

Lindsey Fowkes 50% Member Owner

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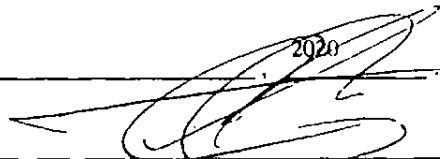
E. Effective date, if other than the date of filing: As soon as possible **(optional)**

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the 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 record is filed.

Dated February 10th



Signature of a member or authorized representative of a member

Chip Carlton

Typed or printed name of signee

Filing Fee: \$25.00