

L20000027598

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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☐ WAIT

☐ MAIL

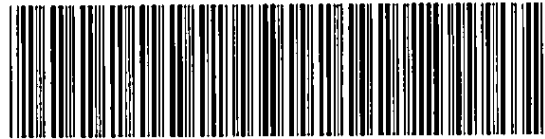
(Business Entity Name)

(Document Number)

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LLC AMEND

1. ALL LINES INS. ASSOC, L.L.C.
(CORPORATE NAME AND DOCUMENT #)

2. _____
(CORPORATE NAME AND DOCUMENT #)

3. _____
(CORPORATE NAME AND DOCUMENT #)

4. _____
(CORPORATE NAME AND DOCUMENT #)

5. _____
(CORPORATE NAME AND DOCUMENT #)

6. _____
(CORPORATE NAME AND DOCUMENT #)

**SPECIAL
INSTRUCTIONS:**

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

FILED

2020 JAN 10 AM 10:25

ALL LINES INS. ASSOC. L.L.C.

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

STATE
FL

The Articles of Organization for this Limited Liability Company were filed on 01/21/2020 and assigned
Florida document number L20000027598.

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:

(Principal office address MUST BE A STREET ADDRESS)

5489 Wiles Road

Suite 303

Coconut Creek, Florida 33073

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

5489 Wiles Road

Suite 303

Coconut Creek, Florida 33073

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:

Anthony DiGiorgio

New Registered Office Address:

5489 Wiles Road, Suite 303

Enter Florida street address

Coconut Creek

City

Florida 33073

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.

DocuSigned by:

Anthony DiGiorgio

If Changing Registered Agent, Signature of New Registered Agent

MGR = Manager
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AP	Steven Weiss	17224 Northway Circle	<input type="checkbox"/> Add
		Boca Raton, FL 33496	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Jordan T. Weiss	5489 Wiles Road	<input type="checkbox"/> Add
		Suite 303	<input type="checkbox"/> Remove
		Coconut Creek, FL 33073	<input checked="" type="checkbox"/> Change
MGR	Anthony DiGiorgio	5489 Wiles Road	<input checked="" type="checkbox"/> Add
		Suite 303	<input type="checkbox"/> Remove
		Coconut Creek, FL 33073	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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STATE
COLLEGE, FL

2003 JUN 10 AM 10:25
STATE
FL

(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)

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 3/9/2023, 2023

DocuSigned by:

JORDAN WEISS

14A4D38393C148A

Signature of a member or authorized representative of a member

Jordan T. Weiss

Typed or printed name of signee

Filing Fee: \$25.00