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Office Use Only



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COVER LETTER

Division of Corporations				
SUBJECT:	Name of Limited	e Detailing, U	<u>C</u>	
The enclosed Articles of An	nendment and fee(s) are submi	tted for filing.		
Please return all correspond	ence concerning this matter to	the following:		
	Dylan	Burnett Name of Person		
	All In Mo	bile Detailing	, UC	
	5026 E. H	umming bird Dr	<u>, </u>	
	labelle, FL allin - det	City/State and Zip Code at Ling O outlook be used for fulfile annual report notificati	-· @M	
For further information con-	cerning this matter, please call:		,	
Dylan Bu	erson	at (239) 770 - Area Code Daytime Tel	555 ephone Number	
Enclosed is a check for the s	following amount: S30.00 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)	

TO:

Registration Section

Mailing Address:
Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address:

Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

All To Mobile Datailing 110

(Name of the Limited Liability Company as it (A Florida Limited Liability	now appears on our records.)
The Articles of Organization for this Limited Liability Company were fill Florida document number <u>L 21 000 089 o 33</u> .	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability co	mpany here:
The new name must be distinguishable and contain the words "Limited Liability Com	pany," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	7 7
_ -	
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered office address agent and/or the new registered office address here:	s on our records, <u>enter the name of the new registere</u>
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	Florida
Cit	y Zip Code
New Registered Agent's Signature, if changing Registered Agent:	

New Registered Agent's Signature, il 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 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	Type of Action
MGR	Dylan Burnett	5026 E. Hummingbird Dr. Labelle, FL 33935	XAdd
			□Remove
			□Change
			□Add
			□Remove
			Change
			Change 21 HAdd. 21
		·	
			Remove
			□ Add
			□Remove
		 	□Change

			□Remove
			□Change
			□Add
			□Remove
			□Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) E. Effective date, if other than the date of filing: ______ (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. ature of a member or authorized representative of a member