## 121000530781

(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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## **COVER LETTER**

, ,

TO: Registration S Division of Co			
Domain, L	LC		
SUBJECT:	Name of Lin	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspondent	ondence concerning this matter	to the following:	
	Kevin Velie		
	<del></del>	Name of Person	<del> </del>
		Firm/Company	
	1218 Seeley Circle NW		
		Address	<del></del>
	Palm Bay, F1, 32907		
		City/State and Zip Code	
		to be used for future annual report not	dification)
	concerning this matter, please c		
Kevin Velic		321 537-4699 at ()	
Name o	of Person	at () Area Code Daytin	ne Telephone Number
Enclosed is a check for t	he following amount:		
■ \$25.00 Filing Fee	(2) \$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 Addre Registration Division of C P.O. Box 63	Section Corporations 27	Street Address: Registration So Division of Co The Centre of	rporations Tallahassee
Tallahassee,	FL 32314	2415 N. Monro	oe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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		· HI / / Jb
Domain, LLC		
( <u>Name of the Limited Liability Com</u> (A Florida Limite	npany as it now appears on our records.) \(\) ed Liabdity Company)	c:,
The Articles of Organization for this Limited Liability Compa Florida document number <u>L21000530781</u> .	ny were filed on December 21, 2021	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited li	ability company here:	
All The Best Property Solutions, LLC		
The new name must be distinguishable and contain the words "Limited Lie	ability Company," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		<del></del>
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered offic agent and/or the new registered office address here:	re address on our records, <u>enter the</u>	name of the new registere
Name of New Registered Agent:		<del></del>
New Registered Office Address:	Fatan Elan Landa et al Ilaina	
	Enter Florida street address	
	, Florid	
	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

H amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

or remov	ed from our records:		
MGR =	Manager		
AMBR =	Authorized Member		

<u>Title</u>	<u>Name</u>	Address	Type of Action
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			□Remove
			Change
			□Add
		<del>.</del>	Remove
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Effective date, if other than the d	late of filing:			(ontional)	
Effective date, if other than the difference of the date is listed, the date must be note: If the date inserted in this blood document's effective date on the Dep	ck does not meet ti	he applicable s	of filing or more th latutory filing req	an 90 days after filing, airements, this date	) Pursuant to 605,0207 will not be listed as
record specifies a delayed effective d is filed.	date, but not an ef	fective time, at	12:01 a.m. on the	e earlier of: (b) The	e 90th day after the
1	20:	23			
August 23		·			
Dated	Z : -				
Dated	ignature of a member	er or authorized	representative of a r	nember	<del></del>

Filing Fee: \$25.00