

L22000335201

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

(Business Entity Name)

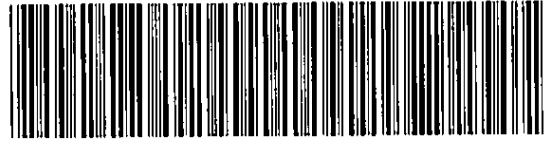
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2022 AUG 29 PM 1:24

STATE OF FLORIDA  
TALLAHASSEE

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2022 AUG 29 PM 1:48

STATE OF FLORIDA  
TALLAHASSEE

A. BUTLER

AUG 29 2022

# COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** All In Title, LLC  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Renaë Allison  
Name of Person

All In Title, LLC  
Firm/Company

769 Cortaro Dr.  
Address

Sun City Center, FL 33573  
City/State and Zip Code

Info@allintitlegroup.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Renaë Allison at ( 813 ) 716-1981  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- \$25.00 Filing Fee       \$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 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

FILED

2022 AUG 29 PM 1:49

SECRETARY OF STATE  
TALLAHASSEE, FL

All In Title. 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 07/29/2022  
Florida document number L22000335201

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)

769 Cortaro Dr

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

769 Cortaro Dr

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:

Renee Allison

New Registered Office Address:

769 Cortaro Dr.

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.

Renee Allison

001908 verified  
08/28/22 3:19 PM EDT  
NWAM-07TPJRBE-VETW

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>MGR</u>	<u>Rene Carpena</u>	<u>769 Cortaro Dr SSC, FL 33573</u>	<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
<u>MGR</u>	<u>Richard C. Shelley</u>	<u>769 Cortaro Dr SSC, FL 33573</u>	<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
<u>MGR</u>	<u>Gustavo Torres</u>	<u>769 Cortaro Dr SSC, FL 33573</u>	<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
<u>MGR</u>	<u>Rehae Allison</u>	<u>769 Cortaro Dr.</u>	<input type="checkbox"/> Add
		<u>SSSC, FL 33573</u>	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

