

L23000397693

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

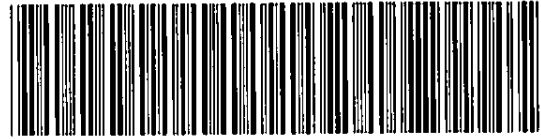
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600426626136

STATE
FL
MAR 28 AM 8:06

RECEIVED
2024 MAR 28 AM 11:20
TALLAHASSEE, FLORIDA

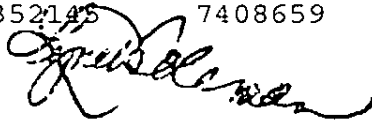
A. HUNT

03/28/24

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 352145 7408659

AUTHORIZATION : 

COST LIMIT : \$ 25.00

ORDER DATE : March 4, 2024

ORDER TIME : 2:54 PM

ORDER NO. : 352145-080

CUSTOMER NO: 7408659

DOMESTIC AMENDMENT FILING

STATE
OFFICE
MAR 04 2024 AM 8:06
TALLAHASSEE, FL

NAME: LIVING SECURE INSURANCE
ADVISORS, LLC

EFFECTIVE DATE:

XX ARTICLES OF AMENDMENT
 RESTATED ARTICLES OF INCORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Amanda Miller -- EXT#

EXAMINER'S INITIALS: _____

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

Living Secure Insurance Advisors, 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 09/01/2011 and assigned Florida document number L23000397693.

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)

18100 Von Karman Ave, 10th Floor

Irvine, CA 92612

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

Name of New Registered Agent:

Corporation Service Company

New Registered Office Address:

1201 Hays Street

Enter Florida street address

Tallahassee


City

Florida 32301

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>
MGR	Odalys C. Arevalo	7757 W. Flagler St., Ste. 210	<input type="checkbox"/> Add
		Miami, FL 33144	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Mercedes Cabrera	7757 W. Flagler St., Ste. 210	<input type="checkbox"/> Add
		Miami, FL 33144	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Thomas W. Corbett	18100 Von Karman Ave., 10th Floor	<input checked="" type="checkbox"/> Add
		Irvine, CA 92612	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	P. Gregory Zimmer, Jr.	18100 Von Karman Ave., 10th Floor	<input checked="" type="checkbox"/> Add
		Irvine, CA 92612	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Ralph S. Hurst	18100 Von Karman Ave., 10th Floor	<input checked="" type="checkbox"/> Add
		Irvine, CA 92612	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Alliant Sunshine, Inc	18100 Von Karman Ave., 10th Floor	<input checked="" type="checkbox"/> Add
		Irvine, CA 92612	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

2008 SEP 11 AM 8:07
STATE OF FL

STATE
DEC. 11
AM 8:07

STATE
SEAL

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.

Dated March 4, 2024

C. E. Baumann
Signature of a member or authorized representative of a member

Jennifer E. Baumann

Typed or printed name of signee

Filing Fee: \$25.00