P17000070273

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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPOR	ATION: All Together Servi	ices, Inc.		
DOCUMENT NUMB	ER: P17000070273			
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.		
Please return all corresp	ondence concerning this ma	tter to the following:		
	Rodgetta L Irven			
-	Name of Contact Person			
-		Firm/ Company		
	209 Lake Gene Dr			
-		Address		
_	Longwood, FL 32779			
		City/ State and Zip Code		
alltogo	etherservicesinc@gmail.com			
	E-mail address: (to be us	sed for future annual report	notification)	
For further information	concerning this matter, pleas	se call:		
Rodgetta L Irven		at (925-7613	
Name o	Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check for	the following amount made	payable to the Florida Depa	urtment of State:	
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio Clifton 2661 E	Address Iment Section In of Corporations Building Executive Center Circle	

Articles of Amendment to Articles of Incorporation of

All Together Services, Inc.

An Together Services, Inc	
(Name of Corporation as currently file	1 with the Florida Dept. of State)
P17000070273	· · · · · · · · · · · · · · · · · · ·
(Document Number of Corp	oration (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, this <i>Florida</i> its Articles of Incorporation:	la Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
name must be distinguishable and contain the word "corporation," " "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc," or "Co".	
word "chartered," "professional association," or the abbreviation "P.A."	
B. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADDRESS</u>)	
-	
C. Enter new mailing address, if applicable:	

D. <u>If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:</u>

Name of New Registered Agent		
	(Florida street address)	
New Registered Office Address:		Florida
	(City)	(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

(Mailing address MAY BE A POST OFFICE BOX)

Thereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	VP	William E Boling	204 Lake Gene Dr
Add X Remove			Longwood, FL 32779
2) Change			
Add			
3) Change Add			
Remove			
4) Change			
Add			
5) Change			
Add Remove			
6) Change			
Add			
Remove			

If amending or adding additional Arti Attach <i>additional sheets, if necessary).</i>	(Be specific)
If an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:

The date of each amendment(s) a date this document was signed.	doption:	, if other than the
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this l document's effective date on the Do	plock does not meet the applicable statutory filing requirements, this epartment of State's records.	date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were add by the shareholders was/were so	opted by the shareholders. The number of votes cast for the amendmen afficient for approval.	t(s)
	proved by the shareholders through voting groups. The following states each voting group entitled to vote separately on the amendment(s):	nent
	for the amendment(s) was/were sufficient for approval	
hy	(voting group)	
	(voting group)	
	opted by the board of directors without shareholder action and sharehol	der
The amendment(s) was/were addaction was not required.	opted by the incorporators without shareholder action and shareholder	
June 25, 20	810	
Dated	odsette Inve	
selecte	irector, president or other officer – if directors or officers have not bee d, by an incorporator – if in the hands of a receiver, trustee, or other co ted fiduciary by that fiduciary)	
	Rodgetta I. Irven	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	