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	Registration Sectory			•
SUBJEC	T: Michael A	ngelo Plumbing, LLC		
		(Name of Lim	ited Liability Company)	
The enclo	sed Articles of A	mendment and fee(s) are sub	omitted for filing.	
Please ret	urn all correspon	dence concerning this matter	r to the following:	
•		Jacquelyn Scharff		
			(Name of Person)	
		Michael Angelo Plun	nbing, LLC (Firm/Company)	
		1771 Mallard Lake F	Road	TA'S
			(Address)	P 22 2000 APR 22 SECRETARY LLAHASSE
Melbourne, FL 32940				TAR ASS
			(City/State and Zip Code)	E P D
For further	er information cor	ncerning this matter, please of	call:	1: 5 5 TATE ORIDA
<u>Jacquelyn Scharff</u> <u>at (321) 775-4626</u>				
	(Name of	Person)	(Area Code & Daytime T	elephone 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/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Michael Angelo Plumbing, 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 10/25/2007 and assigned Florida document number L07000108241 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 end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." B. If amending the registered agent and/or registered office address on our records, ent registered agent and/or the new registered office address here: Name of New Registered Agent: Jacquelyn Scharff 1771 Mallard Lake Road New Registered Office Address: (Enter Florida street address) Melbourne Florida 32 (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 608, 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.

Changing Registered Agent Signature of New Registered Agent)

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records: MGR = Manager MGRM = Managing Member **Title** <u>Name</u> <u>Address</u> **Type of Action** MGR_ Jacquelyn Scharff 1771 Mallard Lake Road ✓ Add Melbourne, FL 32940 ☐ Remove Add Remove Add Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated April 14

Typed or printed name of signee

Signature of a member or authorized representative of a member

Page 2 of 2

Michael Brian Scharff

Filing Fee: \$25.00