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COVER LETTER

| | nbing Unlimited LLC | | |
|-----------------------------|--|---|--|
| SUBJECT: | Name of Limit | led Liability Company | |
| | | | |
| The enclosed Articles of A | Amendment and fee(s) are sub- | nitted for filing. | |
| Please return all correspon | ndence concerning this matter t | o the following: | |
| | Nicholas T. Johnson | | |
| | | Name of Person | · · · · · · · · · · · · · · · · · · · |
| | Plumbing | | |
| | | Firm/Company | |
| | 800 south hollybrook drive | blg. 56 unit 308 | |
| | | Address | |
| | pembroke pines FL 33025 | | |
| | | City/State and Zip Code | |
| | plumbingunlimitedlle@gma E-mail address: () | til.com to be used for future annual report | notification) |
| For further information c | oncerning this matter, please ca | | |
| NICHOLAS JOHNSON | | 954 8640180 | |
| Name o | f Person | at () Area Code Da | sytime Telephone Number |
| Enclosed is a check for the | he 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 Addre | <u>ss:</u> | Street Addres | <u>ss:</u> |

Registration Section
Division of Corporations

P.O. Box 6327

TO:

Registration Section Division of Corporations

Tallahassee, FL 32314

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

| Plumbing Unlimited LLC | | |
|---|--|------------------------------|
| (Name of the Limited Liability Compa (A Florida Limited | iny as it now appears on our records Liability Company) | <u>.</u>) |
| The Articles of Organization for this Limited Liability Company Florida document number $\frac{1.17000159741}{1.17000159741}$ | were filed on JULY 26, 2017 | and assigned |
| This amendment is submitted to amend the following: | | |
| A. If amending name, enter the new name of the limited liab | oility company here: | |
| The new name must be distinguishable and contain the words "Limited Liab | ility 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) | <u> </u> | |
| Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | | 21 AM 9: 24 |
| B. If amending the registered agent and/or registered office agent and/or the new registered office address here: | address on our records, <u>enter</u> | the name of the new register |
| Name of New Registered Agent: | | |
| New Registered Office Address: | Enter Florida street addres | · S |
| | , Flo | orida |
| | 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 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> | Name | Address | Type of Action |
|--------------|----------------|---------------------------------------|--|
| MGR | Velda Belroche | 3721 S.W 58TH AVE HOLLYWOOD, FL 33023 | □Add |
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| cord specifies a delayed is filed. | effective date, but | not an effective | time, at 12:0 | a.m. on the ca | rlier of: (b) | The | e 90th o | lay after ti |
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