204000014959

(Red	questor's Name)	
(Add	dress)	
(Add	dress)	
(City	//State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bus	siness Entity Nar	ne)
(Doc	cument Number)	
Certified Copies	Certificates	• s of Status
Special Instructions to F	iling Officer:	
	A. LU	INT
	NOV 14 2	2012
E	EXAMII	VER

400241506704

11/09/12--01011--027 **25.00

II REW -9 PH 5: 30

Office Use Only



COVER LETTER

TO: Registration Section
Division of Corporations

Christopher Tuttas Pool Service 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:

Carol Tuttas

Name of Person

Christopher Tuttas Pool Service LLC

Firm/Company

8286 Bermuda Sound Way

Address

Boynton Beach. FI 33436

City/State and Zip Code

carol.tuttas@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Carol Tuttas

^{*},561,951-7523

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/COURIER ADDRESS:

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Christopher Tuttas Pool Service				
(Name of the Limited Liabili	ity Company as it now appears on our a Limited Liability Company)	r records.)		
	02 - 25	5-2004		
The Articles of Organization for this Limited Liability	Company were filed on 2-25-2	C4	and assig	med
Florida document number L 400014959 L C	240000 1495 g			
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the lin	mited liability company here:			
The new name must be distinguishable and end with the w "L.L.C."	ords "Limited Liability Company," the	designation "LLC	or the ab	breviation
Enter new principal offices address, if applicable:		. <u> </u>		
(Principal office address MUST BE A STREET ADD	ORESS)	75		
) - () - (2	81 ~~
				1 f
Enter new mailing address, if applicable:		ζή: (1) -	⁽⁵⁾ (do	-
(Mailing address MAY BE A POST OFFICE BOX)		['1 <u>'</u>	J.	
		050	့် ပ္ဌာ	
	•	4777	ည	
B. If amending the registered agent and/or registered agent and/or the new registered office ad		ords, <u>enter the</u>	name of	the new
Name of New Registered Agent:				
New Registered Office Address:				
	Enter Flor	ida street addres	S	
		_, 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 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.

If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, <u>enter the title</u>, <u>name</u>, <u>and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member

<u>Title</u>	Name	Address	Type of Action
MBBM	Christopher Tuttas	P [©] Bo⊠243213	_ Add
		Boynton Beach FL 33424	Remove
			Add
			Remove
		ALLABASEE	Remove
		FIGATE A	Add Remove
			_ Add _ Remove
			_ Add
			_

D. If amendi	ing any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	
Dated 11-(<u>55-12</u>
	Carollo Italia
•	Signature of a member or authorized representative of a member
	Carol Tuttas
•	Typed or printed name of signee
	Page 3 of 3

Filing Fee: \$25.00

SÉCRETARY OF STATE TALLAHASSEF, FLORIG

FILE: 30