L08000024802

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SECRETARY OF STATE

2011 JUN 16 開設

T. CLINE

JUN 1 7 2011

EXAMINER

COVER LETTER

TO: Registration Division of C	Section orporations				
SUBJECT:	Kelly I	Plumbing LLC			
	Name of Lim	ited Liability Company			
The enclosed Articles	of Amendment and fee(s) are su	bmitted for filing.			
Please return all corres	pondence concerning this matte	r to the following:			
		Leah M. Kelly			
		Name of Person			
		Kelly Plumbing LLC			
		Firm/Company			
		13061 Maleo Rd			
		Address			
		Brooksville Fl 34614			
		City/State and Zip Code			
	E-mail address: (drk1914@gmail.com to be used for future annual report i	notification)	201 SE	
For further information	concerning this matter, please of		,	2011 JUN 16 SECKETARY ALLAHASSE	Market A
	Daniel Kelly	at (_727_)	967-6931 ytime Telephone Number	SEE 6	R-MOTE.
	of Person	Area Code & Da	ytime Telephone Number	JUN 16 AM DO 46 RETARY OF STATE AHASSEE, FLORIOA	
Enclosed is a check for					
[]\$25.00 Filing Fee	Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclo	osed) Certified (e of Status &	i)

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

Kelly Plum (<u>Name of the Limited Liability Compa</u> (A Florida Limited I	nbing LLC ny as it now appears Liability Company)	on our records.)		
The Articles of Organization for this Limited Liability Company Florida document numberL08000024802	were filed on	3/10/2008	and assigned	
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liab				
N/A			······································	
The new name must be distinguishable and end with the words "Lim"L.L.C."	ited Liability Company	," the designation "	LLC" or the abbreviation	
Enter new principal offices address, if applicable:	N/A		IS 20	
(Principal office address MUST BE A STREET ADDRESS)				
			HE &	
			Sin o	
Enter new mailing address, if applicable:	N/A			á
(Mailing address MAY BE A POST OFFICE BOX)			5 5	٠
			STATE STATE	,•
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her	fice address on ou <u>e</u> :	r records, <u>enter</u>	the name of the new	
Name of New Registered Agent: N/A			<u></u>	
New Registered Office Address:				
	Enter	Florida street add	dress	
		, 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, name, and address of each Manager or Managing Member being added or removed from our records</u>:

<u>Titlė</u>	<u>Name</u>	<u>Address</u>	Type of Action
mgr	Daniel Kelly	13061 Maleo Rd Brooksville, Fl 34614	Add Remove
	-		
	-		C Damesto
			
			S Add Remove
		er change(s) here: (Attach additional sheets, if t	SSET DAG TO REMOVE
). If ameno	′Δ	er change(s) here: (Attach additional sheets, if r	necessary. F
_			
 Dated	June 8	2011	
	7	each /	
	Cianatura of	a member or authorized representative of a member_	

Page 2 of 2

Filing Fee: \$25.00