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COTIO JIM PROHINCIENER

COVER LETTER

Division of Co				
Pyle's Plui SUBJECT:	mbing LLC			
SCDJECT.	Name of Lim	ited Liability Company		
The enclosed Articles of	(Amendment and feets) are sub	mitted for filing.		
Please return all corresp	ondence concerning this matter	to the following:		
	Donald Pyle			
		Name of Person	- · · · · · · · · · · · · · · · · · · ·	
	Pyle's Plumbing LLC			
		Firm/Company		
	42321 Pond View Lane			
	-	Address	<u></u>	
	Deland, FL, 32720			
	City/State and Zip Code			
	pylesplumbing a hotmail.ec			
	F-mail address: (to be used for future annual report notif	ication)	
For further information	concerning this matter, please c	alt:		
Kim Pierce		352 383-2865 at ()		
Name	of Person	Area Code Daytime	Telephone Number	
Enclosed is a check for	the following amount:			
□ \$25,00 Hiling Fee	■ \$30.00 Fifting Fee & Certificate of Status	□ \$55,00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy radditional copy is enclosed)	

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327

Tallahassee, 14, 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

(Name of the Limited Liability (A Florida	y Company as it now appears on our re Limited Liability Company)	cords.)
The Articles of Organization for this Limited Liability Co.		2008 and assigned
is amendment is submitted to amend the following: If amending name, enter the new name of the limited liability company here: If amending name, enter the new name of the limited liability company here: It amending name, enter the new name of the limited liability company," the designation "LLC" or the abbreviation "LLC." It amending address address, if applicable: If amending address, if applicable: If amending the registered agent and/or registered office address on our records, enter the name of the new eightered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address		
A. If amending name, enter the new name of the limit	ted liability company here:	
		<u> </u>
The new name must be distinguishable and contain the words "Limi Enter new principal offices address, if applicable:	ted Liability Company," the designation	
• •	ESS)	(A) 1 P
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		GA*
registered agent and/or the new registered office addr		ords, enter the name of the new
New Registered Office Address:	Enter Florida street a	ddress
		, 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 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 Changing Registered Agent, Signature of New Registered Agent

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>	<u>Name</u>	<u>Address</u>	Type of Action
mgr	Michael Gaulin		
		311 W. Lewis Ave, Apopka, FL. 32712	≘ Remove
			Add
		v	Remove
			☐ Change
			Add Comment
			<u></u>
			Remove
			Change
			Add
		□ Remove	
			Change
			☐ Remove
			□ Change

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ffect	August 27, 2018 Service date, if other than the date of filing:	`
i an ell <u>Note:</u>	ective date is fisted, the date must be specific and cannot be prior to date of filing or more than 90 days after filing refusuant to 605. If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be list ent's effective date on the Department of State's records.	5,0207 (ed as ti
	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earli 90th day after the record is filed.	er of:
Dated	September 27, 2018	
	Dount Kell	
	Signature of a member or authorized representative of a member	
	Signature of a manufact or audionzed representance of a method	

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Filing Fee: \$25.00