

L09000094826

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

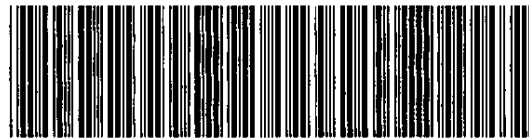
Special Instructions to Filing Officer:

A. LUNT

SEP - 3 2010

EXAMINER

Office Use Only



900184832809

08/30/10--01044--006 **50.00

RECEIVED
TALLAHASSEE, FLORIDA

2010 SEP - 2 PM 12:24

FILED



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 31, 2010

MICHAEL J. KASTNER
104 SW 11TH AVE. B
FORT LAUDERDALE, FL 33301

SUBJECT: MJK PLUMBING SERVICES LLC
Ref. Number: L09000094826

We have received your document for MJK PLUMBING SERVICES LLC and your check(s) totaling \$50.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with an affidavit or letter stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6094.

Agnes Lunt
Regulatory Specialist II

Letter Number: 410A00020900

September 3, 2010

Department of State
Division of Corporations
Corporate Filings
ATTN: aGNES
P.O. Box 6327
Tallahassee, FL 32314

RE: MJK PLUMBING LLC - L06000098409

This letter is to document that I will not reinstate MJK PLUMBING LLC - L06000098409.

A handwritten signature in black ink, appearing to read "Michael J. Kastner", with a stylized flourish at the end.

MICHAEL J. KASTNER

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: MJK PLUMBING SERVICES 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:

MICHAEL J. KASTNER

Name of Person

MJK PLUMBING SERVICES LLC

Firm/Company

104 S.E. 11TH AVE-B

Address

FT. LAUDERDALE FL 33301

City/State and Zip Code

mjkplumbing@atlanticbb.net

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

For further information concerning this matter, please call:

Michael J. Kastner

Name of Person

at (at)

305-215-2075

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

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TALLAHASSEE, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MJK PLUMBING SERVICES 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 10/01/2009 and assigned
Florida document number L09000094826.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

MJK PLUMBING LLC

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

Enter new principal offices address, if applicable:

NA

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

NA

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

NA

New Registered Office Address:

Enter Florida street address

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, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

FEIN Number - IS - 27-1014610

Dated 8-25-2010

Michael J. Kastner
Signature of a member or authorized representative of a member

Michael J. Kastner
Typed or printed name of signee

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CLERK OF DISTRICT COURT
ILLINOIS