

L12000036964

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

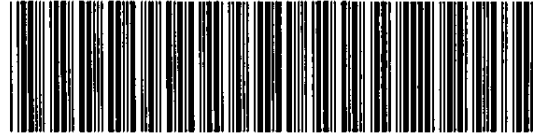
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700242176747

11/29/12--01003--012 **25.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
12 NOV 29 PM 12:19

NOV 30 2012
T HAMPTON

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: All in one plumbing 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:

Miguel A. Correa
Name of Person

All in one plumbing LLC
Firm/Company

6424 4 Ave N.E
Address

Bradenton FL 34208
City/State and Zip Code

Allinoneplumbingllc@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Miguel A. Correa at (941) 721-7586
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**

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

12 NOV 29 PM 12:19

All-In-one Plumbing 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 03/15/2012 and assigned Florida document number L12000036964.

This amendment is submitted to amend the following:

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

All In One Plumbing LLC
The new name must be distinguishable and end with the words "Limited Liability 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)

6424 4 AVE NE
Bradenton FL 34208

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

6424 4 AVE NE
Bradenton FL 34208

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:

Miguel A. Correa

New Registered Office Address:

6424 4 Ave N.E.

Enter Florida street address

Bradenton
City

Florida

34208
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

Title	Name	Address	Type of Action
MGRM	Joseph Pittelli	2085 Amesbury Circle Wellington FL 33414	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	Miguel A. Correa	6424 4 Ave N.E Bradenton FL 34208	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

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

EIN # 45-4806178

Dated November 26, 2012

Signature of a member or authorized representative of a member

JOSEPH PITTELLI
Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00

12 NOV 29 PM 12:19

SECRETARY OF STATE
DIVISION OF CORPORATIONS