L12000149803

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J. SAULSBERRY EXAMINER

JAN 0 7 2013

COVER LETTER

TO:

Registration Section
Division of Corporations

SUBJECT

Nealy 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:

MCNEIL-NEALY, LILLIAN

Name of Person

Nealy Plumbing LLC

Firm/Company

760 SPARKLEBERRY BLVD

Address

QUINCY FL 32351

City/State and Zip Code

Imcneil1234@comcast.net

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

For further information concerning this matter, please call:

Lillian McNeil-Nealy

₈₅₀662-1419 or 508-2918

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

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Nealy Plumbing LLC (Name of the Limited Liability C	Company as it now appears of	n our records)			
(<u>Name of the Limited Liability C</u> (A Florida Lin	mited Liability Company)	(val 1 ct val usa)			
The Articles of Organization for this Limited Liability Con Florida document number <u>L12000149803</u>	mpany were filed on 11/30.	/2012 and assigned			
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limite	ed liability company here:				
The new name must be distinguishable and end with the words "L.L.C."	s "Limited Liability Company,"	" the designation "LLC" or the abbreviation			
Enter new principal offices address, if applicable:	,				
(Principal office address MUST BE A STREET ADDRE	ESS)				
		7 2			
		Fy S			
Enter new mailing address, if applicable:					
(Mailing address MAY BE A POST OFFICE BOX)	*	52.2 10.20			
(muning nauress man be a rost of rice box)		7 7			
					
B. If amending the registered agent and/or register	red office address on our	records, enter the name of the new			
registered agent and/or the new registered office addre	ess here:	» O			
Name of New Registered Agent:					
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>	Address	Type of Action
MGR	Dale Nealy	760 SPARKLEBERRY BLVD	· 🗸 Add
	•	QUINCY FL 32351	Remove
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Ifam	nending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
ed	·
	Signature of a member or authorized representative of a member
	Signature of a member or authorized representative of a member
	Lillián McNeil-Nealy
	Typed or printed name of signee

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Filing Fee: \$25.00

