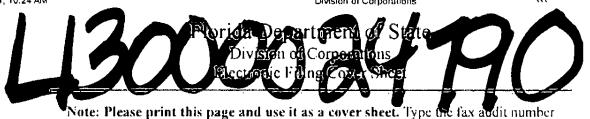
5/6/24, 10:24 AM

Division of Corporations

(((H24000164111 3)))



(shown below) on the top and bottom of all pages of the document.

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Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LICENSES ETC INC

Account Number : I20070000159

Phone : (239)777-1028 Fax Number : (877)275-3593

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN FLORIDA SHORES PLUMBING LLC

SUPPORT@LICENSESETC.COM

Certificate of Status	0
Certified Copy	0
Page Count	07
Estimated Charge	\$25,00

Electronic Filing Menu

Corporate Filing Menu

Help \$202 80 YAM T. LEMIEUX Page: 4 of 7

		COVER LETTER	₹		(((H24000164111 3)))
TO: Registration Se	etion	·;		} ,	•
Division of Cor			•		
\$	FI OPIDA SE	HORES PLUMBING LLO	_		
SUBJECT:		ited Liability Company	, , , , , , , , , , , , , , , , , , , 		
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
		TODD BABBITT			
		Name of Person			
		LICENSES, ETC., INC.			
		Firm/Company			
	27	911 CROWN LAKE BLVD			
		Address			
	BON	IITA SPRINGS, FL 34135			
		City/State and Zip Code			
	SUPP E-mail address: (ORT@LICENSESETC.CO to be used for future annual r	M eport notification)		
For further information c	oncerning this matter, please c				
TODD BA	BBITT	at (239)	777-1028		
	f Person	Area Code	Daytime Teleph	one Number	
Enclosed is a check for the	-				
⊠ \$25.00 Filing Fec	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)		Certified C	of Status &
<u>MailingAddres</u>	<u>s:</u>	<u>StreetAde</u>	dress:		
Registration S	Section	Registra	tion Section		
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P.O. Box 632 Tallahassee, I			tre of Tallaha Monroe Stree		n
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Tallahassee, FL 32303

From: Licenses Etc.

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(((H24000164111 3)))

	SHORES PLUM				
(Name of the Limit	d Liability Compa A Florida Limited	ny as it now appears Liability Company)	on our records.)		
The Articles of Organization for this Limited Li Florida document numberL13000024790			02/18/2013	and assi	gned
This amendment is submitted to amend the follo	wing:				
A. If amending name, enter the new name of	the limited liab	ility company her	<u>e</u> :		
The new name must be distinguishable and contain the w	ords "Limited Liabi	lity Company," the des	signation "LLC" or the	abbreviation "L.I	C."
Enter new principal offices address, if applica	able:	922 NE 34TH T	ER		
(Principal office address MUST BE A STREE	TADDRESS)	CAPE CORAL,	FL 33909		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		922 NE 34TH T			
B. If amending the registered agent and/or reagent and/or the new registered office address		address on our rec	cords, enter the na	S 224	registered
Name of New Registered Agent:	LOUK, ROBE	RT G		7 AMIL	
New Registered Office Address:	922 NE 34TH		E		
		Enter Floria	la street address	щ О	
		CAPE CORAL	, Florida _	33909	
		Ciţy		Zip Coxle	
New Registered Agent's Signature, if changing R	legistered 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.

RA .
If Changing Registered Agent, Signature of New Registered Agent

Page: 6 of 7

2024-05-07 18:28:52 GMT

From: Licenses Etc. (((H24000164111 3)))

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

Title	Name	Address	Type of Action
AMBR	LOUK, ROBERT G	922 NE 34TH TER	
		CAPE CORAL, FL 33909	□Remove
			⅓ Change
AMBR	LOUK, ROBERT J	922 NE 34TH TER	□Add
		CAPE CORAL, FL 33909	□Remove
			X Change
			Add
			Remove
			□Change
			□ Remove
			☐ Change
			Add
			□Remove
	 		□Add
			□Remove
			□Change

To: Sunbiz LLC Amendment

(((H24000164111 3)))

rective date, if other than the date of filing: (optional) neffective date is listed, the date mast be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to A05.0207 te; If the date inserted in this block does not neet the applicable statutory filing requirements, this date will not be listed as turnent's effective date on the Department of State's records. Second specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b). The 90th day after the stilled. MAY 3RD 2024 Signature of a member or authorized representative of a member.		······································				
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Signature of a member or authorized representative of a member			RA			
		Sign	ature of a member or auth-	orized representative of a	ı member	