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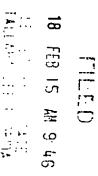
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TIBOOSTY LECOSEL

COVER LETTER

	istration Sec ision of Corp					
ennieze.		tive Plaza, LLC				
SUBJECT:		Name of Lim	ited Liability Company			
The enclosed	I Articles of A	Amendment and fee(s) are sub	mitted for filing.			
Please return	all correspor	ndence concerning this matter	to the following:			
		Raymond B. Palmer				
			Name of Person			
		Raymond B. Palmer, P.A.				
			Firm/Company			
		913 Gulf Breeze Parkway, Suite 41				
			Address			
		Gulf Breeze, FL 32561				
			City/State and Zip Code	 _		
		rex.m.cramer	1. h			
r 6 4			to be used for future annual report notif	ication)		
ror turtner ir	normation co	ncerning this matter, please co	1H:			
Raymond B.	. Palmer		850 916-1000 at ()			
	Name of	Person	Area Code Daytime	: Telephone Number		
Enclosed is a	check for the	e following amount:				
■ \$25.00 F	iling 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

2401 Executive Plaza, LLC						
(Name of the Lim	ited Liability Compa (A Florida Limited I	ny as it now appears on o iability Company)	ur records.)		_	
the Articles of Organization for this Limited Liability Companional document number 1.15000145672		were filed on 8/25/201	5	and	l assigi	ned
This amendment is submitted to amend the fol	llowing:					
A. If amending name, enter the new name	of the limited liabi	lity company here:				
TJ Plumbing Services, LLC						
The new name must be distinguishable and contain the	words "Limited Liabil	ity Company," the designat	ion "LLC" or the a	ibbreviation	1"L.L.C	
Enter new principal offices address, if appli	icable:					
Principal office address MUST BE A STRE	ET ADDRESS)			<u>→</u>	<u> </u>	
			···- -	:	FEB 1	
Enter new mailing address, if applicable:		109 Blais Trail			5	
Mailing address MAY BE A POST OFFICI	E BOX)	Apartment #5			₩	j
		Daytona Beach, FL 32	2118	<u>in</u> 17,	œ	
				-	9 1	
B. If amending the registered agent and registered agent and/or the new registered of New Registered Agent:			records, enter	<u>the nai</u>	<u>ne of</u>	the n
	109 Blais Trait,	Apartment #5			,	
New Registered Office Address:	107 171413 11411,	Enter Florida stre	vet address	<u> </u>		
	Daytona Beach,		Florida <u>3</u>	2118		
		City		Zip Ce	ode	

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:

	Authorized Member		
<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
			Add
			Remove
			Change
			Remove
			Change
			☐ Remove
			Change
			Remove
			Change
		-	Remove
			Change
			□ Remove
			Change

). II amendi	ng any other information, enter change(s) here: (Attach addi	tional sheets, if necessary.)	
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		9.00 0.00	-
			क
Effective o	ate if other than the date of filing:	(ontional)	
(If an effective	ate, if other than the date of filing: date is listed, the date must be specific and cannot be prior to date of filing or	more than 90 days after filing.) Pu	rsuant to 605.0207 (3
	date inserted in this block does not meet the applicable statutory fill effective date on the Department of State's records.	ng requirements, this date will	not be listed as the
	·		
the record	specifies a delayed effective date, but not an effective	time, at 12:01 a.m. on	the earlier of:
o) The 90t	h day after the record is filed.		
Dated	2/14/18		
	TO D		
	Signature of a member or authorized representation	o of a member	
	RAMOND B. PALMO	in KSQ,	

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00