15000171573

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TO:	Registration Se Division of Cor			
SUBJE	D & S Plur	nbing LLC		•
		Name of Limit	ed Liability Company	
		Amendment and fee(s) are subm	-	
Please r	etum ali correspo	ndence concerning this matter to	o the following:	
		Benton Carl Davis		
			Name of Person	
		D & S Plumbing LLC		
			Firm/Company	18
		7902 Sale Street		
			Address	<u></u>
		Sneads, Fl 32460		
			City/State and Zip Code	<u> </u>
		bentondavisl@gmail.com E-mail address: (to	be used for future annual report	notification)
For furt	her information co	oncerning this matter, please cal		,
Benton	Carl Davis		850 573-252	4
	Name of	Person	at () Arca Code Da	ytime Telephone Number
Enclose	d is a check for th	e following amount:		
□ S25	.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

D & S Plumbing and Restoration LL						
(Name of the Limite	d Liability Compa A Florida Limited I	ny as it now appears on our records.) Liability Company)	· · · · · · · · · · · · · · · · · · ·			
The Articles of Organization for this Limited Lia Florida document number L15000171573	ibility Company	were filed on 11/23/15	and assign	ed		
This amendment is submitted to amend the follow	wing:					
A. If amending name, enter the new name of	the limited liabi	ility company here:				
D & S Plumbing LLC						
The new name must be distinguishable and contain the wo	rds "Limited Liabil	ity Company," the designation "LLC" or the ab	breviation "L.L.C.	**		
Enter new principal offices address, if applica	7902 Sale Street					
(Principal office address MUST BE A STREET	dment is submitted to amend the following: Inding name, enter the new name of the limited liability company here: Inding LLC Inding LLC In must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." In principal offices address, if applicable: Inding address MUST BE A STREET ADDRESS) In mailing address, if applicable: In mailing address, if applicable:					
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	<u>0x)</u>	N/A				
			्रि ज	the new		
Name of New Registered Agent:	N/A		တ္ကေသ	11 ye y 200 200		
New Registered Office Address:		Enter Florida street address		<u> </u>		
			ြင့္လ ယူ	A TOTAL OF		
		, Florida	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 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 add or removed from our records:

MGR ≈ Manager AMBR = Authorized Member

<u>Title</u>	Name	<u>Address</u>	Type of Action
N/A	N/A		[] Add
	•		□ Remove
			Change
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