## L16000181574

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PICK-UP	WAIT	MAIL
(Bu	isiness Entity Name	)
(Do	ocument Number)	
Certified Copies	_ Certificates o	f Status
Special Instructions to	Filing Officer:	
!		

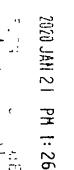
Office Use Only

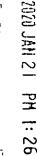


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## COVER LETTER .

TO:	Registration Se Division of Cor			•
CUDIC		PLUMBING AND SEPTIC L	LC	
SUBJE	CI:	Name of Lim	ited Liability Company	
The enc	losed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please r	eturn all correspo	ndence concerning this matter	to the following:	
		ALBERT BARRETT		
		<del></del>	Name of Person	
		BARRETT PLUMBING A	AND SEPTIC LLC	
			Firm/Company	<del></del>
		4557 NW 41ST ST		
		· · · · · · · · · · · · · · · · · · ·	Address	
		LAUDERDALE LAKES	FL 33319 UNITED STATES	
			City/State and Zip Code	
		ROLLANEON@GMAIL.C		
			to be used for future annual report noti-	fication)
For furt	her information c	oncerning this matter, please c	all:	
ALBER	RT BARRETT		754 802-5234	
	Name o	f Person	Area Code Daytim	e Telephone Number
Enclose	d is a check for th	ne following amount:		
□ \$25	5.00 Filing Fee	窗 \$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 Addres Registration S		<u>Street Address:</u> Registration Sec	ction
	Division of C	orporations	Division of Cor	porations
	P.O. Box 632 Tallahassee, 1		The Centre of T	allahassee e Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BARRETT PLUMBING AND SEPTIC LL	C	
(Name of the Limited Liabi (A Florid	lity Company as it now appears on our records.) la Limited Liability Company)	<del>-</del>
The Articles of Organization for this Limited Liability (Florida document number L16000181574	Company were filed on <u>09/29/2016</u>	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lin	nited liability company here:	
The new name must be distinguishable and contain the words "Lit	mited 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 ADD	RESS)	
Enter new mailing address, if applicable:	<u></u>	2
(Mailing address MAY BE A POST OFFICE BOX)		-O
	·	
		26
B. If amending the registered agent and/or registere agent and/or the new registered office address here:		e name of the new registered
agent and/or the new registered office address here.	•	
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	Florid	
	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 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:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
Assistant	Manager Stoney-An	n Brown Barrett 384 NW 47TH AVE PLANTATION FL 33	3317 ■Add
	v		□Remove
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			□Add
		<del></del>	Remove
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			□Add
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Filing Fee: \$25.00