

L1600024241

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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MAIL

(Business Entity Name)

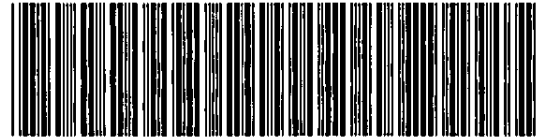
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TALLAHASSEE, FLORIDA

D. SCOTT

JAN 9 2017



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 22, 2016

BRIAN TAYLOR
24265 STILLWELL PKWY
BONITA SPRINGS, FL 34135

We have received your document for and your check(s) totaling \$60.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

NO RECORD OF STRIKE MECHANICAL LLC ON SUNBIZ.ORG

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Dionne M Scott
Regulatory Specialist II

Letter Number: 116A00027270

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Sunbiz.org
Document Number
L16000214241
Strike Mechanical LLC.

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Strike Mechanical 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:

Brian Taylor

Name of Person

Firm/Company

24265 Stillwell Pkwy.

Address

Bonita Springs, Florida 34135

City/State and Zip Code

Bdtaylor7018@yahoo.com

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

For further information concerning this matter, please call:

Brian Taylor

239 895-1201
at ()
Area Code Daytime Telephone Number

Name of Person

Enclosed is a check for the following amount:

- | | | | |
|---|--|--|---|
| <input type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input checked="" type="checkbox"/> \$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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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Strike Mechanical LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 12-02-2016 and assigned
Florida document number CP 575 G

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Strike Mechanical Welding Services " LLC"

The new name must be distinguishable and contain the words "Limited 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 ADDRESS)

24265 Stillwell Pkwy.

Bonita Springs, Florida

34135

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

24265 Stillwell Pkwy.

Bonita Springs, Florida

34135

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

n/a

New Registered Office Address:

n/a

Enter Florida street address

n/a

, Florida n/a

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>	<u>Address</u>	<u>Type of Action</u>
n/a	n/a	n/a	<input type="checkbox"/> Add
		n/a	<input type="checkbox"/> Remove
		n/a	<input type="checkbox"/> Change
n/a	n/a	n/a	<input type="checkbox"/> Add
		n/a	<input type="checkbox"/> Remove
		n/a	<input type="checkbox"/> Change
n/a	n/a	n/a	<input type="checkbox"/> Add
		n/a	<input type="checkbox"/> Remove
		n/a	<input type="checkbox"/> Change
n/a	n/a	n/a	<input type="checkbox"/> Add
		n/a	<input type="checkbox"/> Remove
		n/a	<input type="checkbox"/> Change
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		n/a	<input type="checkbox"/> Remove
		n/a	<input type="checkbox"/> Change

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TALLAHASSEE, FLORIDA

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

n/a

81-4579561

E. Effective date, if other than the date of filing: n/a (optional)
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record 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 record is filed.

Dated 12-17-2016



Signature of a member or authorized representative of a member

Brian D Taylor

Typed or printed name of signee

17 JAN 17 5:56 PM
F1
SECRET
DEPT. OF STATE
TALLEN