## L17000014804

(Requestor's Name)
(Address)
(Address)
(1001000)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
(Boodine Hamber)
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2025 MAR 19 PM 3: 16

S. ROBERTS
MAR 2 4 2025



March 4, 2025

BRIAN M STRONG 1321 21ST ST SW NAPLES, FL 34117 US

SUBJECT: STRONG'S SERVICES LLC

Ref. Number: L17000014804

We have received your document for STRONG'S SERVICES LLC. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

Missing signature of member or authorized representative.

If you have any questions concerning the filing of your document, please call (850) 245-6000.

STANTON H ROBERTS Regulatory Specialist III

Letter Number: 725A00004715



## **COVER LETTER**

Registration Section
Division of Corporations

Tallahassee, FL 32314

TO:

STRONG'S	S SERVICES LLC			
Sobate 1.	Name of Lim	nited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	BRIAN M STRONG			
		Name of Person		
	STRONG'S SERVICES L	LC		
		Firm/Company		
	1321 2 <b>1ST ST SW</b>			
		Address		
	NAPLES, FL 34117			
		City/State and Zip Code		
	STRONGPLUMBINGSOL	<del>-</del>		
	E-mail address: (	to be used for future annual report no	tification)	
For further information of	concerning this matter, please c	all;		
BRIAN M STRONG		239 207-0101 at ( )		
Name o	of Person		me Telephone Number	
Enclosed is a check for the	he following amount:			
□ \$25.00 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		Street Address:	ootion	
Registration Section Division of Corporations			Registration Section Division of Corporations	
P.O. Box 6327			The Centre of Tallahassee	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

STRONG'S SERVICES LLC		
(Name of the Limited Liability Cor (A Florida Limit	npany as it now appears on our recorded Liability Company)	<u>is.</u> )
The Articles of Organization for this Limited Liability Compa	any were filed on 1/18/2017	and assigned
Florida document number L17000014804		
his amendment is submitted to amend the following:		
a. If amending name, enter the new name of the limited li	iability company here:	
he new name must be distinguishable and contain the words "Limited Li	ability Company," the designation "LLC	O" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS		
		SEC
		HAR
Enter new mailing address, if applicable:		A 10 1
Mailing address MAY BE A POST OFFICE BOX)		SS - IT
		ي ي
		F 20
3. If amending the registered agent and/or registered offingent and/or the new registered office address here:	ce address on our records, <u>enter</u>	the name of the new regist
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street addres	<i>z</i> z
		orida
	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 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>	Type of Action
AR	COURTNEY M STRONG	1321 21ST ST SW	
		NAPLES, FL 34117	=Remove
			□Change
			□ Remove
			☐ Change
			□Add
			□ Remove
			□ Change
			□ Add
			□Remove
			Change
			□Add
			□Remove
			□ Change
			ПRетоve
			Change

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	1/9/2025
Effect	nve date, it other than the date of filing: (optional)
n an ei Note:	fective 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 605.020 If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as
docun	ment's effective date on the Department of State's records.
е гесо	rd 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
rd is f	iled.
Dated	1/27/2025
<b>76</b> (C)	
	Signature of a member or authorized representative of a member

Typed or printed name of signee