

L17000110601

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP☐ WAIT☐ MAIL

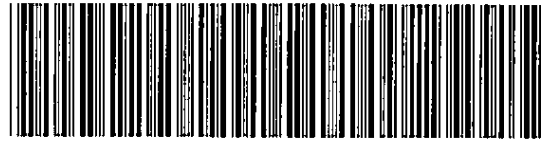
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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ALL INFORMATION CONTAINED  
HEREIN IS UNCLASSIFIED  
DATE 08-28-2001 BY 60322 UCBAW

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## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Preslie's Pipeline Services 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:

Natalie Burke  
Name of Person

Preslie's Pipeline Services LLC  
Firm/Company

21398 NE County Road 274  
Address

Altha, FL 32421  
City/State and Zip Code

presliespipelineervices@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Natalie Burke at (850) 643-8922  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the 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:**  
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**

Preslie's Pipeline Services 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 05/18/2017 and assigned Florida document number L17000110601.

This amendment is submitted to amend the following:

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

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)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

**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:

Natalie Burke

New Registered Office Address:

21398 NE County Road 274

Enter Florida street address

Altha

City

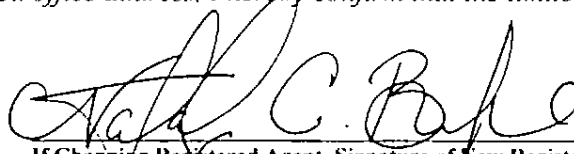
Florida

32421

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>
MGR	Preston Burke		<input type="checkbox"/> Add
		21398 NE CR 274 Altma, FL 32421	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Natalie Burke	21398 NE CR 274 Altma, FL 32421	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Preston Burke	21398 NE CR 274 Altma, FL 32421	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

FILED  
9 SEP 27  
11:05  
TALLAHASSEE, FL  
CLERK OF COURT  
JANET L. HARRIS

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

Not other but wanted to verify that Preston Burke  
is being removed as owner/MGR and that  
Natalie Burke will then be owner/MGR.  
And Preston Burke will be an Authorized  
Member.

FILED  
19 SEP 27 AM 11:06  
DEPARTMENT OF STATE  
HALL OF RECORDS

E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)

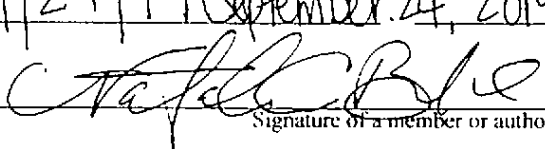
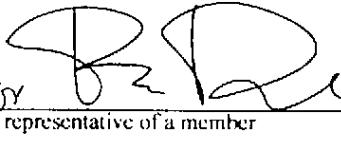
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

**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

9/24/19 (September 24, 2019)

 or   
Signature of a member or authorized representative of a member

Natalie Burke

or Preston Burke

Typed or printed name of signee