LI800060341

(Red	questor's Name)	
(Add	dress)	
(Add	dress)	
(City	y/State/Zip/Phone	#)
PICK-UP	WAIT	MAIL
(Bus	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to I	Filing Officer:	

Office Use Only



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D. BRUCE AUG 23 2018



FLORIDA DEPARTMENT OF STATE Division of Corporations

August 11, 2018

JACQUELINE HANNA 456 WASECA DRIVE LAKE WORTH, FL 33462

SUBJECT: HANNA PLUMBING LLC

Ref. Number: L18000060241

We have received your document for HANNA PLUMBING LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

AMBR

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.

Deborah Bruce Corporate Records Supervisor Letter Number: 118A000166188EFFLORING

COVER LETTER

	gistration Secision of Corp				
SUBJECT:		UMBING LLC			
SUBJECT.		Name of Limited Liability Company			
The enclose	d Articles of a	Amendment and fee(s) are sub	omitted for filing.		
Please return	n all correspo	ndence concerning this matter	to the following:		
		JACQUELINE HANNA			
			Name of Person		-
			Fitm/Company		-
456 WASECA DRIVE					2 0
			Address		
		LAKE WORTH, FL 3346	52		2011 AUG 15 SECKE FAR TALLAHASS
			City/State and Zip Code	<u> </u>	(""\ ""\ .
		HANNAPLUMBING 1@Y		_	
For further i	nformation c	E-mail address: (oncerning this matter, please c	to be used for future annual report noti all:	fication)	Parion Parion
JACKIE HA	ANNA		954 882-2238		
	Name o	f Person	Area Code Daytim	e Telephone Number	r
Enclosed is	a check for th	ne following amount:			
\$25,001	Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	ite of Status &
MAILING ADDRESS: Registration Section		STREET/COURI Registration Section			

Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

HANNA PLUMBING LLC		
(Name of the Limited I.	Inhillty Company as if new appears on our records.) Florida Limited Liability Company)	
	Total Samoo Sastato, Company	
The Articles of Organization for this Limited Liabil	lity Company were filed on 03/07/2018 and ass	igned
Florida document number L18000060241		•
Tiones cocument marroot	THE PROPERTY OF THE PROPERTY O	
This amendment is submitted to amend the following	ng:	
A. If amending name, enter the new name of the	e limited liability company here:	
The new name must be distinguishable and contain the words	r "Limited Liability Company," the designation "LLC" or the abbreviation."	L.C."
Enter new principal offices address, if applicable	e:	<u> </u>
(Principal office address MUST BE A STREET A.	(DDRESS)	
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	<u> </u>	<u>୍ ନ୍</u>
Enter new mailing address, if applicable:		<u> </u>
(Mailing address MAY BE A POST OFFICE BOX	<u>x</u>)	(T) <u>(</u>
	· · · · · · · · · · · · · · · · · · ·	
	·	
	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:		
New Registered Office Address:		
TION TOSISIAM STITLE COMMENS.	Enter Florida street address	
	. Florida	
-	City Zin 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

				
				
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ective date, if other than the dat effective date is listed, the date must be s	e of filing:		(optional)	2016 / SALLL
te: If the date inscried in this block of	does not meet the applicable st	of thing of more than 90 actitiony filling requirem	days after filing.) Pursuan ents, this date will not	be listed sadde
ument's effective date on the Depart	ment of State's records.			SSE S
record specifies a delayed eff	ective date, but not an e	effective time, at :	12:01 a.m. on the	earlier of#
he 90th day after the record				2: 4.7 5 K.E. LORIDA
ad AUGUST 21	2018			
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7 (L) (L)	Tarabasa menapi or dudiorized i	obrancement of the the time		

Page 3 of 3

Filing Fee: \$25.00

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
AMBR	JACQUELINE HANNA	456 WASECA DRIVE	
		LAKE WORTH, FL 33462	☐ Remove
			☐ Change
			□ Add
		· .	□ Remove
			☐ Change
			Add 2
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