

# L18000174 883

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

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2019 DEC -9 AM 8:17  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*Amend/cus*

JAN 13 2020  
I ALBRITTON

# COVER LETTER

**Registration Section  
Division of Corporations**

**SUBJECT:** G & JI. Plumbing Services, LLC  
Name of Limited Liability Company

enclosed Articles of Amendment and fee(s) are submitted for filing.

se return all correspondence concerning this matter to the following:

Jose Luis Fajardo  
Name of Person  
G & JI. Plumbing Services, LLC  
Firm/Company  
2212 S. Chickasaw Trail, Suite 120  
Address  
Orlando, Florida 32825  
City/State and Zip Code  
fajardojlfc@hotmail.com  
E-mail address: (to be used for future annual report notification)

further information concerning this matter, please call:

Luis fajardo 786 426-0696  
Name of Person at ( ) Area Code Daytime Telephone Number

posed 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 Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

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

G & JI. Plumbing Services, LLC

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

Articles of Organization for this Limited Liability Company were filed on 11/21/2019 and assigned  
Florida document number L18000174883.

This amendment is submitted to amend the following:

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

Any new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

If amending principal office address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

If amending mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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:

New Registered Office Address:

*Enter Florida street address*

\_\_\_\_\_, **Florida** \_\_\_\_\_  
City Zip Code

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

Remaining Authorized Person(s) authorized to manage, enter the name and address of each person being added  
removed from our records:

R = Manager

BR = Authorized Member

	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
R	Jose Luis Fajardo	2212 S. Chickasaw Trail	<input checked="" type="checkbox"/> Add
		Orlando, FLorida 32825 US	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
R	Grisel D Flores	2212 S. Chickasaw Trail	<input checked="" type="checkbox"/> Add
		Orlando, Florida 32825 US	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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