118000223706

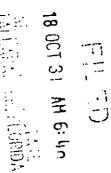
(Re	equestor's Name)	
(Ac	ldress)	
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(Ci	ty/State/Zip/Phone	e #)
	☐ WAIT	MAIL
(Bı	siness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	





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K. SALY NOV 15 2018

COVER LETTER

DIVISION OF COR	porations		
SUBJECT:	USA Plumbing L.L.C.		
	Name of Lim	ited Liability Company	
he enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
lease return all correspo	ndence concerning this matter	to the following:	
		Brian W Carroll	
		Name of Person	
		USA Plumbing L.L.C	
		Firm/Company	····
		335 Camellia St.	
	1177	Address	
		Chuluota Florida, 32766	
		City/State and Zip Code	
		usaplumbinglfc@gmail.com to be used for future annual report n	- 210 marking t
for further information c	oncerning this matter, please c		(Mineaum)
Brian W	Carroli	407	402-7870
Name o	f Person	at () Area Code Dayı	time Telephone Number
inclosed is a check for th	ne following amount:		
日 \$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

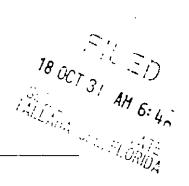
TO:

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 Fallahassee, F1, 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



USA Plumbing L.L.	C.		
(Name of the Limited Liability Compa (A Florida Limited)	ny ay it now appears Liability Company)	on our records.)	
The Articles of Organization for this Limited Liability Company	were filed on	9.20/18	and assigned
Florida document numberL18000223706			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ility company her	<u>ē</u> :	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the de-	signation "LI ("" 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 of registered agent and/or the new registered office address her		our records, <u>ent</u>	er the name of the nev
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florid	la street address	
		, Florida	
· - · · ·	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. Thereby 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, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager

AMBR = Authorized Member

Title	<u>Name</u>	Address	Type of Action
AMBR	Rachel N Carroll	335 Camellia St. Chuluota, Fl 32766	🖽 Add
			□ Remove
			☐ Change
			D Add
			Remove
			Changed 3 H 6: 4
			□ Change
			Add
			☐ Remove
			Change
			☐ Remove
			Change
			Remove
			C) Character

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

Effective date, if other than the date of filing:
the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: The 90th day after the record is filed.
Dated <u>C+27</u> . 2018 . Signature of a member or authorized representative of a member
Brian W Carroll Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00