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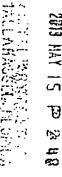
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PICK-UP	☐ WAIT	MAIL
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## **COVER LETTER**

TO:		stration Section of Corp					
orto tra		ORTHRIC	OHT PLUMBING LLC				
SUBJEC	C1: _	_	Name of Limit	ted Liabil	ity Company		
TL	14	A	Ad - and foo(a) any subm	nisted fo	- Glina		
			Amendment and fee(s) are subn				
Please ro	eturn a	ill correspoi	idence concerning this matter t	o the foll	lowing:		
			RICHARD L COX V				
			FORTHRIGHT PLUMBING		me of Person		
			7706 N OLA AVE	Fin	m/Company		<del></del>
			TAMPA, FL 33604		Address		
			RICKY@FORTHRIGHTPLU	City/Sta MBING.C	te and Zip Co	de	<del></del>
			E-mail address: (t	o be used	for future ann	ual report notific	cation)
For furth	her inf	ormation co	oncerning this matter, please ca	ıll:		•	
RICHA	RD L	COX V		at	E .	403-0732	
		Name of	Person	at	Area Code	Daytime	Telephone Number
Enclose	d is a	check for th	e following amount:				
□ <b>\$</b> 25.	.00 Fil	ling Fee	■ \$30.00 Filing Fee & Certificate of Status	Ce	00 Filing For Fortified Copy is		☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
		Registra Division P.O. Bo	NG ADDRESS: ation Section n of Corporations ox 6327 ssee, FL 32314		Regis Divisi Clifto 2661	EET/COURIE tration Section on of Corpora n Building Executive Cen nassee, FL 323	tions ter Circle

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PILED

FORTHRIGHT PLUMBING LLC (Name of the Limited Liability Company as it now appears on our records)
(A Florida Limited Liability Company) 证实证 随时间的 The Articles of Organization for this Limited Liability Company were filed on DEC. 20.2018 AHASSEL and assigned Florida document number \_\_\_\_\_L18000292052 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 "LLC." 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: New Registered Office Address: Enter Florida street address , Florida \_ City 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

If Changing Registered Agent, Signature of New Registered Agent

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.

	from our records:	to manage, enter the title, name, and au	
MGR = N AMBR = A	lanager Authorized Member		
<u>Title</u>	Name	Address	Type of Action
AMBR	KARINA A COX	7706 N OLA AVE TAMPA, FL 33604	Add
			☐ Remove
			Change
			Remove
			Change
<del></del>			Add
			Remove
<del></del>			Add
			☐ Remove
			☐ Change
			□ Remove
			☐ Change
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			Change

RICHARD L COX V AND KARINA A OWNERSHIP OF THE LLC.	COX ARE MAIN			<del></del>
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ective date, if other than the date of fi	ling:		(optiona	1)
effective date is listed, the date must be specific te: If the date inserted in this block does not be a specific term.	and cannot be prior to ot meet the applica	o date of filing or mo ble statutory filing	e than 90 days after fill requirements, this da	te will not be listed as
eument's effective date on the Department	of State's records.	_		
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record specifies a delayed effectiv	e date, but not	an effective ti	ne, at 12:01 a.m	i. on the earlier of
he 90th day after the record is file	30.			
, APRIL 17TH	2019			
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Signature c	of a member or author	rized representative of	f a member	
	1			

Page 3 of 3

Filing Fee: \$25.00