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(Re	questor's Name)		
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PICK-UP	WAIT	MAIL MAIL	
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Certified Copies	Certificates	of Status	
			
Special Instructions to	Filing Officer:		
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Office Use Only



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S. TALLENT FEB 0 4 2019 10 JAN 25 PH 1: 20

April

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: MorLe Plumbing LLC Name of Limited Riability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Leroy L Morris Name of Person
Firm/Company
720 Holly St
NORTH LAUDERDALE FL 33068
North Lauder dale FL 33068 City/State and Zip Code Mor Le Plumbing (a) amail com Fi-mail address: (to be used for future annual report invitincation),
For further information concerning this matter, please call:
Legol Morris at 954 5375 Name of Person Area Code Daytime Telephone Number
7 Total Code 12 Lytinic Telephone Pathoca
Enclosed is a check for the following amount:
\$25.00 Filing Fee Certificate of Status \$25.00 Filing Fee Certificate of Status \$25.00 Filing Fee Certified Copy (additional copy is enclosed) \$25.00 Filing Fee Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FI. 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

Morte Plumb		
(Name of the Limited Liability ((A Florida Li	Company as it now appears on our records.) mited Liability Company)	
The Articles of Organization for this Limited Liability Com		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	I 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 ADDRES	SS)	_
	— · · · · · · · · · · · · · · · · · · ·	_
	# TI	_
Enter new mailing address, if applicable:	THE STATE OF THE S	
(Mailing address MAY BE A POST OFFICE BOX)	3 0	
	3. 23	_
		
B. If amending the registered agent and/or register registered agent and/or the new registered office addres	ed office address on our records, enter the name of the s here:	<u>nev</u>
Name of New Registered Agent:		_
New Registered Office Address:		
	Enter Flor ida street address	
	, Florida	
	City Hip 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 = A	uthorized Member		
<u>Title</u>	Name	Address	Type of Action
MGR	Morris, Leroy L	720 Holly St North Lauderdale, Fl 33	D Add
	,	North LAUderdALE, Fl 33	<u> 2068</u> □ Remove
			Change
			Add
			Remove
		 	Change
			□ Remove
			Change
			□ Remove
			Change
		 	Add
			□ Remove
			□ Change
			Add
			□ Remove
			Change

, II wines	ding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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(If an effective Note: 1	re date, if other than the date of filing: (optional) tive 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) f the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the nt's effective date on the Department of State's records.
	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 90th day after the record is filed.
Dated _	01-22 - 2019
	L Mours Signature of a member or authorized representative of a member
	Leroy Morris Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00