49000 128 137

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





100333637961

09/03/19--01011--011 **25.00

2019 SEP -3 PM 12: 29

SEP LUTSEY

COVER LETTER

TO:

Registration Section

Divi	ision of Cor	porations				
cubicer.	MERICA PRESSURE SYSTEMS, LLC (L19000128137) ECT:					
SUBJECT:						
The enclosed	Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return	all correspo	ndence concerning this matter	to the following:			
		BARRETT LAWRANCE				
	Name of Person MERICA PRESSURE SYSTEMS, LLC					
	Firm/Company 116 CRENSHAW LAKE ROAD					
	Address LUTZ, FLORIDA 33548					
	City/State and Zip Code					
For further in	nformation c	E-mail address: (to be used for future annual report not all:	ification)		
BARRETT	LAWRANC	Е	813 600-7467			
	Name o	f Person		ne Telephone Number		
Enclosed is a	check for th	ne following amount:				
■ \$25.00 F	iling Fee	□ \$30.00 Filing Fee & Certificate of Status	S55,00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60,00 Filing Fee. Certificate of Status & Certified Cupy (additional copy is enclosed)		
	Registr Divisio P.O. Bo	ING ADDRESS: ration Section on of Corporations ox 6327 issee, FL 32314	STREET/COUR Registration Secti Division of Corpo Clifton Building 2661 Executive C	on rations		

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MERICA PRESSURE SYSTEMS, LLC

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

The Articles of Organization for this Limited Liability Company Florida document number L19000128137	were filed on	5/13/2019	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ility company	here:	
AMERITECH PRESSURE CLEANING SYSTEMS, LLC			
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," th	e designation "L.L.C" 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 here Name of New Registered Agent: New Registered Office Address:	<u>e</u> :		2019 SEP - 3 PH 22
		Florida street address	
	City	, Floric	laZyp Code
New Registered Agent's Signature, if changing Registered Agent:	···		
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as pleing filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance provided for it	of my duties, and 1 n Chapter 605, F.S	am familiar with and . Or, if this document is

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

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
			☐ Remove
			□ Change
			□ Remove
			□ Change
			Add
			☐ Remove
			□ Change
			□ Add
			□ Remove
			□ Change
			□ Remove
			□ ('hange
		 	☐ Remove
			□ Changa

	· · · · · · · · · · · · · · · · · · ·
	DATE OF FILING
(If an et <u>Note:</u>	ive date, if other than the date of filing: [coptional] [coptional]
b) The	cord 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	8/29/19 2019
	Signature of a member or authorized representative of a member
	BARRETT LAWRANCE
	Typed or printed name of signce

Page 3 of 3

Filing Fee: \$25.00