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PICK-UP	☐ WAIT	MAIL
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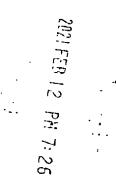
Office Use Only



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** 02 2021 S. YOUNG



COVER LETTER

TO: Registration Section

Division of Corporations

Butl	er's Home In	spection Service LLC		
SUBJECT:	· - · · ·	Name of Lim	ited Liability Company	
The enclosed Arti	cles of Amen	dment and fee(s) are sub	mitted for filing.	
			•	
	Н	arold Butler		
	_		Name of Person	
	В	utler's Home Inspection	Service, LLC	
			Firm/Company	
	20	77 York Cottage Drive		
			Address	
SUBJECT: Butler's Home Inspection Service LLC				
	hlb	utler79@gmail.com		
		E-mail address; (to be used for future annual report not	ification)
For further inform	ation concerr	ing this matter, please co	all:	
Harold Butler				
	Name of Perso	n	Area Code Daytin	ne Telephone Number
Enclosed is a chec	k for the follo	owing amount:		
■ \$25.00 Filing	Fee 🗍	_	Certified Copy	Certificate of Status &
Registro Division P.O. Bo	ntion Sectic n of Corpor x 6327	ations	Registration Se Division of Co The Centre of	rporations Fallahassee

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Butler's Home Inspection Service, 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 were filed on $\frac{5-15-2019}{1}$ Florida document number $\underline{L}19000131803$ This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Butler's Heating & Cooling LLC 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 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 register agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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 addor removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
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Tective date	: if other than the date of filing:	
in effective da	e. if other than the date of filing: (optional) te is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.6	0207
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ecord specif	ies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of; (b) The 90th day after t	ılı.s
is filed.	es a delayed effective date. But not an effective time, at 12.01 a.m. on the earlier of, (b) The solid day after	me
nted	2-9 2021.	
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