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(Re	equestor's Name)	
(Ad	dress)	
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(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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COVER LETTER

TO:	Registration Sect Division of Corpo					
eno n	zor.	PLAN B MAI	INTENANCE LLC			
SUBJF	sci:	Name of Lim	ited Liability Company			
The en	closed Articles of A	mendment and fee(s) are sub	mitted for filing.			
Please	return all correspond	lence concerning this matter	to the following:			
		NEF	RY N. CASTRO BERTO			
			Name of Person			
		!	PLAN B MAINTENANCE LLC			
			Firm/Company			
		4585	5 PALM BEACH BLVD STE 5010	i		
			Address			
		ŀ	FORT MYERS, FL 33905			
			City/State and Zip Code	<u>. </u>		
			mbilling@planbrepairs.com to be used for future annual report notif	ication)		
For fur	ther information con	cerning this matter, please ca	•	icution,		
Nery N	l. Castro Berto		239 848 7595 at ()		1307	\bigcirc
	Name of P	erson	Area Code Daytime	: Telephone Number	28 ATT 1702	!
Enclose	ed is a check for the	following amount:			<i>→</i>	: 7
□ \$25	5.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified (ing F ce. c of Status &	J

Mailing Address:
Registration Section
Division of Corporations P.O. Box 6327

Street Address: Registration Section Division of Corporations The Centre of Tallahassee

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	PLAN B MAINTE	ENANCE LLC			
(Name of the Lim	ited Liability Compa (A Florida Limited	any as it now appears Liability Company)	on our records.)		
The Articles of Organization for this Limited	Liability Company	were filed on	01/22/2020	and assigne	ed
Torida document number	33				
This amendment is submitted to amend the fol	lowing:				
A. If amending name, enter the new name	of the limited liab	oility company her	<u>e</u> :		
The new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the des	ignation "LLC" or the	abbreviation "L,L,C,"	13
Enter new principal offices address, if applicable: 4585 PALM BEACH BLVD			CH BLVD STE 501	01	
Principal office address MUST BE A STRE	FORT MYERS, F	L 33905			
Enter new mailing address, if applicable:		4585 PALM BEA	CH BLVD STE 501	01	
<u>Mailing address MAY BE A POST OFFICE</u>	(BOX)	FORT MYERS, F	L 33905		
				500 500 500	\mathcal{O}
3. If amending the registered agent and/or	registered office	address on our rec	ords, <u>enter the na</u>	me of the new re	<u>giste</u>
gent and/or the new registered office addre	ess nere:			8	•
Name of New Registered Agent:				> 1	
New Registered Office Address:	4585 PALM BI	EACH BLVD STE 5		1:21	
		Enter Floride	a street address	~	
	FORT MYERS		, Florida ³	33905	
		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, I hereby confirm that the limited liability company has been notified in writing of this change.

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 = Authorized Member

<u>Title</u>	Name	Address	Type of Action
MGR	Nancy Yepez	4028 Winkler Ave Apt 101 Fort Myers FL 33916	□Add
			BRemove
			□Change
MGR	Nery N. Castro Berto	4585 Palm Beach Blvd STE 50101 Ft. Myers FL 33	3905 □Add
			□Remove
			🖺 Change
			□Add
			Remove
			Change
			20 Add + 1
			> □ Remove
			N □Change
			□Add
			□Remove
			□Change
<u>. </u>			□ Add
			□ Pamoua

I am updating the address for:	
Title: MGR Nery N. Castro Berto	
New Address: 4585 Palm Beach Blvd ST	TE 50101 Fort Myers, FL 33905
l am removing: Title: MGR Nancy Yepez	
	702
	<i></i> ∑
	24
ive date, if other than the date of filing: fective date is listed, the date must be specific and cannot be prior to da If the date inserted in this block does not meet the applicable ment's effective date on the Department of State's records.	(optional) ste of filing or more than 90 days after filing.) Pursuant to 605 statutory filing requirements, this date will not be list
d specifies a delayed effective date, but not an effective time, led.	at 12:01 a.m. on the earlier of: (b) The 90th day afte
17TH MAY . 2021 .	