L20000051826

(Re	equestor's Name)		
(Ad	ldress)		
(Ad	dress)	 	
(Cit	ty/State/Zip/Phone	e #)	
PICK-UP	TIAW	MAIL	
(Bu	siness Entity Nar	me)	
	ocument Number)		
(LX	cament Number)		
Certified Copies	_ Certificates	s of Status	
Special Instructions to Filing Officer:			
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COVER LETTER

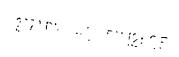
	gistration Se isjon of Cor				
CUDIECT.	BEST PLU	MBING LLC	•		
SUBJECT:		Name of Lim	ited Liability Company		
The enclosed	l Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return	all correspo	ondence concerning this matter	to the following.		
		Salvatore Tavolacci			
			Name of Person		
			Firm/Company	 ·	
		521 sunset lakes dr			
			Address		
		Merritt Island, Florida 329	53		
		bestplumbingrepairs@gmai	City/State and Zip Code Leom		
		E-mail address: (to be used for future annual report	notification)	
For further in	nformation c	oncerning this matter, please co	all:		
Salvatore Tavolacci			321 591-541 at ()	6	
Name of Person			ytime Telephone Number		
Enclosed is	a check for th	he following amount:			
≅ \$ 25.00 l	Filing 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 Copy tadditional copy is enclosed) 	
	iling Addres gistration (Street Address Registration		
	_	Section Corporations	Registration Section Division of Corporations		
P.O. Box 6327			The Centre of Tallahassee		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314





FLORIDA DEPARTMENT OF STATE Division of Corporations

November 13, 2020

SALVATORE TAVOLACCI 521 SUNSET LAKES DRIVE MERRITT ISLAND, FL 32953

SUBJECT: BEST PLUMBING LLC Ref. Number: L20000051826

We have received your document for BEST PLUMBING LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 420A00022728

Shelia S Young Regulatory Specialist II

www.sunbiz.org

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BEST PLUMBING ELC	ZU_U_ = i - i - 4:3 i
(Name of the Limit	ed Liability Company as it now appears on our records.) (A Florida Limited Liability Company)
The Articles of Organization for this Limited L. Florida document number L.	iability Company were filed on 02/14/2020 and assigned
This amendment is submitted to amend the following	owing:
A. If amending name, enter the new name o	f the limited liability company here:
BEST PLUMBING AND AIR LLC	
he new name must be distinguishable and contain the w	ords "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applic	able:
Principal office address MUST BE A STREE	T ADDRESS)
Enter new mailing address, if applicable:	
Mailing address MAY BE A POST OFFICE	<u>BOX)</u>
B. If amending the registered agent and/or ragent and/or the new registered office addre	registered office address on our records, <u>enter the name of the new registered</u> ss here:
Name of New Registered Agent:	Salvatore Tavolacci
New Registered Office Address:	521 Sunset lakes dr
	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, I hereby confirm that the limited liability company has been notified in writing of this change.

City

Merritt Island

If Changing Registered Agent, Signature of New Registered Agent

, Florida <u>32</u>953

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
		·	□Add
			□Remove
			Change
			□Add
			□ Remove
			Change
			□Add
	•		□Remove
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ective date, if other (effective date is listed, th te: If the date inserted cument's effective date	e date must be specific a in this block does no	and cannot be prior of meet the application	able statutory filing		iling.) Pursuant to 605.02
cord specifies a delaye s filed.	d effective date, but r	not an effective ti	me, at 12:01 a.m. o	on the earlier of: (b)	The 90th day after th
		2020			
October 1			·		
ted October 1					
ted October 1	if & Im	6~			
ted October 1	Signature of	a member or autho	prized representative	of a member	

COVER.LETTER

TO: Registration Se Division of Cor						
BEST PLU SUBJECT:	MBING LLC					
SUBJECT.	Name of Lim	ited Liability Company				
	Amendment and fee(s) are sub	-				
rtease teturi ali correspo	ondence concerning this matter Salvatore Tavolacci	to the following.				
	Salvatore Tavolace	Name of Person	 			
		Firm/Company				
	521 sunset lakes dr Address					
	Merritt Island, Florida 329					
	bestplumbingrepairs@gmai	City/State and Zip Code 1.com to be used for future annual report notif	Toot(oo)			
For further information c	oncerning this matter, please co	·	icanon)			
Salvatore Tavolacci		321 591-5416 at ()				
Name o	f Person	Area Code Daytime	: Telephone Number			
Enclosed is a check for the	ne following amount:					
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)			

Mailing Address:

TO:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address:

Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303