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Fax Number : (850)617-6383

From:

Account Name : LICENSES ETC INC Account Number : I20070000159 : (239)777-1028 Fax Number : (877)275-3593

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

SUPPORT@LICENSESETC.COM

LLC AMND/RESTATE/CORRECT OR M/MG RESIGNATION ELITE ROYAL PLUMBING LLC

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COVER LETTER

то:	Registration Se Division of Cor		r.	.:
		YAL PLUMBING LLC		
SUBJE	CT:	Name of Limi	ned Liability Company	
The enc	closed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
		ndence concerning this matter		
		LISA ADAMS		
			Name of Person	
		LICENSES ETC., INC.		
			Firm/Company	
		886 110TH AVE, #6		
			Address	
		NAPLES, FL 34108	Sec(s) are submitted for filing. g this matter to the following: S Name of Person T.C., INC. Firm/Company IVE, #6 Address Address City/State and Zip Code ACENSESETC.COM mail address; (to be used for future annual report notification) Inter, please call: at (239 777-1028 / Area Code) Together and Code Daytime Felephone Number Daytime Felephone Number SiteetAddress: Certified Copy (radditional copy is enclosed) StreetAddress: Registration Section Division of Corporations	
			City/State and Zip Code	
		SUPPORT@LICENSESET		
		E-mail address: (to be used for future annual report no	ification)
For fun	ther information c	oncerning this matter, please co	all:	
LISA	ADAMS			
-	Name o	of Person	Area Code Daytir	ne Telephone Number
Enclose	ed is a check for t	he following amount:		
≘ \$2	5.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	Certified Copy	Certificate of Status & Certified Copy
	MailingAddres Registration		Registration Se	
	Division of C		Division of Co The Centre of	
	P.O. Box 632 Tallahassee,			oe Street, Suite 810

Tallahassee, FL 32303

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Limitias C	amount as it out anosar on our records	7
(A Florida Lin	ompany as it now appears on our records nited Liability Company)	:/
The Articles of Organization for this Limited Liability Completion of Computation of Computatio	pany were filed on 02/20/2020	andassigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	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.	<u>s</u>)	
· ·		7.0 G
		00 3 11
Enter new mailing address, if applicable:		ည်းကို မေ
(Mailing address MAY BE A POST OFFICE BOX)		
A TOTALE BOX		<u> </u>
B. If amending the registered agent and/or registered off agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address:	Enter Florida street address , Flor	rida
	Ciţv	Zip Code
New Registered Agent's Signature, if changing Registered Ag	ent:	
I hereby accept the appointment as registered agent and provisions of all statutes relative to the proper and comp accept the obligations of my position as registered agent being filed to merely reflect a change in the registered of company has been notified in writing of this change.	lete performance of my duties, and as provided for in Chapter 605, F.	l I am familiar with and S. Or, if this document is
16.	Changing Registered Agent Signature of	New Begiggard Vand

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>	<u>Name</u>	Address	Type of Action
AMBR	MELVIN VARGAS JR	8192 GOPHER TORTOISE TRAIL	□ Add
		LEHIGH ACRES. FL 33972	■Remove
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locument's ef	fective date on the Departi	nent of Sta	te's records.	010 0011000	,E redon	emento, and	C		
record specit	ies a delayed effective date	, but not ar	ı effective tir	ne, at 12:01	a.m on the e	arlier of: (b)	The 90th	i day afti	er the
t is filed								•	
ated	July 16		2020	_ •					
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