Division of Corporations



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (813)436-5206

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

Email Address:_

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN BRIGHTER UTILITIES TAMPA PLUMBING, LLC

Certificate of Status	0
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Page Count	03
Estimated Charge	\$25.00

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BRIGHTER UTILITIES TAMPA PLUMBING, LLC

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

	05/00/200		
The Articles of Organization for this Limited Liability Company	were filed on 06/23/2020	and assigned	
Florida document number L20000174795			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ility company here:		
The new name must be distinguishable and contain the words "Limited Liabit	tity Company," the designation "LLC" or the	abbreviation "L.L.C."	
Enter new principal offices address, if applicable:	707 Belleair Rd		
(Principal office address MUST BE A STREET ADDRESS)	Clearwater, FL 33756		
Enter new mailing address, if applicable:			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			
•••			
•••		~	
(Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office a			
(Mailing address MAY BE A POST OFFICE BOX)		***	
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(Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:		~	
(Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office a agent and/or the new registered office address here: Name of New Registered Agent:	address on our records, <u>enter the na</u>	~	
(Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our records, <u>enter the na</u>	me of the new registere	
(Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office a agent and/or the new registered office address here: Name of New Registered Agent:	address on our records, <u>enter the na</u>	~	
(Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office a agent and/or the new registered office address here: Name of New Registered Agent:	address on our records, <u>enter the na</u>	me of the new registers	

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>	<u>Name</u>	<u>Address</u>	Type of Action
			□Add
			□Remove
			□ Change
			CAdd
			□Remove
			[]Change
			□Remove
			FlCbange
			FiAdd
			□Remove
			[]Change
			□Add
			URemove
			□Change
			ÜAdd
			□Remove
			□ Change

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Typed or printed name of signee