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TALLAPASSEE FLORIDA

SEP 2 9 2022

S. PRATHER

COVER LETTER

TO:		stration Sect		,		
SUBJE			Plumbing & Mechanical LLG	~	t	
SUBJE	CI:		Name of Limi	ted Liability Company		
			mendment and fee(s) are sub-		ode nual report notification) 250-6828 Daytime Telephone Number	
			Gregory J. Hill			
				Name of Person		
			Hill/Bertuzzi Plumbing & I	Mechanical LLC		
				Firm/Company		·
			4441 Tarpon Avenue			
				Address	-	
			Bonita Springs FL 34134			
				City/State and Zip Code		
			greg.hill@mepguru.com	15-5		
For firet	her in	formation cor	ncerning this matter, please ca		eport nouncation)	
			neering this matter, prease co			
Gregory	y Hill			at ()		
		Name of I	Person	Area Code	Daytime Telephone	: Number
Enclose	d is a	check for the	following amount:			
□ \$25	.00 Fi	iling Fee	■ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is encl	losed) (60.00 Filing Fee. Certificate of Status & Certified Copy additional copy is enclosed)
		ling Address:		Street Ad	dress:	

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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202

Caio Bertuzzi Plumbing & Mechanical LLC		ر 1 کاتا 1 کاتا
(Name of the Limited Liability Compa (A Florida Limited E	ny as it now appears on our records.) Ciability Company)	2 JIII 15 Part assigned
The Articles of Organization for this Limited Liability Company Florida document number <u>L20000205929</u> .	were filed on 07/15/2020	and assigned 2: 08
This amendment is submitted to amend the following:		·
A. If amending name, enter the new name of the limited liab	ility company here:	
Hill/Bertuzzi Plumbing & Mechanical LLC		
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	4441 Tarpon Avenue	
(Principal office address MUST BE A STREET ADDRESS)	Bonita Springs FL 34134	
Enter new mailing address, if applicable: (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</u>	name of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
		
	, Florid	la Zıp 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>	<u>Name</u>	Address	Type of Action
			□Add
			□Remove
			Remove
			☐ Change
			□ □ Remove
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