Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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COVER LETTER

Registration Section

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	MARIO ROC	OTER LLC	_	,
SUBJECT		Name of Limite	ed Liability Company	
		mendment and fee(s) are subm		
		ZUHAIL MARGARITA DA	ABOIN	!
			Name of Person	
		MARIO ROOTER LLC	_	
			Firm/Company	
	, .	2352 WHITE POPPY DR	<u> </u>	
			Address	
		KISSIMMEE, FL 34747		
			City/State and Zip Code	
		E-mail address: (i	o be used for future annual report notific	ation)
For furth	er information co	oncerning this matter, please ca	all: .	
ZUHAIL	, MARGARITA	DABOIN	321 276-5135 at ()	
	Name of	f Person	Area Code Daytime	Telephone Number
Enclosed	is a check for th	ne following amount:		
≘ \$25.	00 Filing Fee	S30.00 Filing Fee & Certificate of Status	Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
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	Mailing Address Registration Division of C P.O. Box 632 Tallahassee,	Section Corporations 27	Street Address: Registration Sec Division of Corr The Centre of To 2415 N. Monroe Tallahassee, FL	oorations allahassee : Sireet, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MARIO ROOTER LLC	_ <u> </u> i		1	
(Name of the Limited Liability Company as it (A Florida Limited Liability	<u>t now ab</u> ∨ Compa	pear: ny)	s on lour rec	<u>ards.</u>)
•	[F 1]		! .	
The Articles of Organization for this Limited Liability Company were	filed on	08/	19/2020	and assigned
The Articles of Organization for this Emitted Examing Transfer			† :	
Florida document number L20000256448			1 :	
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liability c	ompan	y he	re:	•
		- ! !	11 mm 1	
R ROOTER LLC		·	elemetics **	LLC" or the abbreviation "L.L.C."
The new name must be distinguishable and contain the words "Limited Liability Con	mpany.	ane u	ezifitation	LLC Of the about the same
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Enter new principal offices address, if applicable:		[]	·,·	-
(Principal office address MUST BE A STREET ADDRESS)	<u> </u>	11 1	· · · · ·	
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Enter new mailing address, if applicable:				62
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Name of New Registered Agent:			1	
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New Registered Office Address:	Ente	er Flo	rida street a	ddress
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New Registered Agent's Signature, if changing Registered Agent:	.	11		
I hereby accept the appointment as registered agent and agree to provisions of all statutes relative to the proper and complete perjaccept the obligations of my position as registered agent as provided office add			- canacity.	I further agree to comply with the
I hereby accept the appointment as registered used and legice to	form an	Ce d	fmy dulie	s, and I am familiar with and
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being filed to merely reflect a change in the registered office add	lres I	her.	by confir	m that the limited liability
company has been notified in writing of this change.		111		in the first of th
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