Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : FASTKIT CORP Account Number : I20100000009 : (305)599-0839 Phone

: (305)592-9591 Fax Number

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. Email Address:_____

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

YALL PLUMBING LLC

Certificate of Status Certified Copy Page Count Estimated Charge

Electronic Filing Menu

Corporate Filing Menu

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\$25.00

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

YALL PLUME	
(Name of the Limited Liability Company a (A Florida Limited Liabi	ilt now appears on our records.)
The Articles of Organization for this Limited Liability Company wet	
Florida document number L21000209485	
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 C	ompany," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	WEN E
(Principal office address MUST BE A STREET ADDRESS)	ÇÇ 😕
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Enter new mailing address, if applicable:	PA
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Mailing address MAY BE A POST OFFICE BOX)	22 ~
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 If amending the registered agent and/or registered office addressed and/or the new registered office address here: 	ess on our records, <u>enter the name of the new regist</u> e
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florido street address
	, Florida
(City Zip 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 Changing Registered Agent, Signature of New Registered Agent

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

Title	Name	<u>Address</u>	Type of Action
MGR	YOAN ALBERT	9245 SW 45TH ST	□Add
		MIAM! FL 33165	■Remove
			Change
AMBR	YOAN ALBERT DIAZ	9245 SW 45TH ST	≅ Adđ
		MIAMI FL 33165	□Remove
			□ Change
			□Aċd
			□Remove
			Change
			□Add
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	he Department of State's re	ecords.	G,) =
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ocument's effective date on t record specifies a delayed eff	ne Department of State 8 R	ecorus.	n the earlier of: (b) Th	290th day after the
record specifies a delayed effi is filed.	ne Department of State 8 R	ecorus.	n the carlier of: (b) Th	290th day after the
record specifies a delayed effi is filed.	ective date, but not an offec	ecorus.	n the carlier of: (b) Th	190th day ther the
ocument's effective date on t record specifies a delayed eff is filed.	ective date, but not an effect	ecorus.	n the earlier of: (b) Th	290th day after the