# L21000217004

(Requestor's Name)	'	
(Address)		
(Address)	,	
(City/State/Zip/Phone #)	•	
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		
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Office Use Only



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## **COVER LETTER**

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Tallahassee, FL 32314

	stration Se ion of Cor			
	LARGO CI	USTOM HOMES, LLC		
SUBJECT: _		Name of Limi	ited Liability Company	
The enclosed a	Articles of	Amendment and fee(s) are sub	mitted for filing.	
		indence concerning this matter		
		Michael N. Cannell		
			Name of Person	
		Reed, Heller & Cannell, Ll	l.C	
		•	Firm/Company	
		1100 Walnut St, PO Box 7	27	
			Address	<del></del>
		Murphysboro, Illinois 6290	56	
		<del></del> -	City/State and Zip Code	
		michael@rhc.legal	to be used for future annual report not	ification)
For further info	ormation c	oncerning this matter, please ca		
Michael N. Ca	annell		618 687-2376	
	Name o	f Person	at () Area Code Daytin	ne Telephone Number
Enclosed is a c	check for th	ne following amount:		
<b>■ \$2</b> 5.00 Fil	ling Fee	□ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Regi	ing Addres istration S sion of C		<u>Street Address:</u> Registration Se Division of Co	
	Box 632		The Centre of	· ·

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



LARGO CUSTOM HOMES, LLC

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

The Articles of Organization for this Limited Liability Compar	ny were filed on May 10, 2021	and assigned
Florida document number 1.21000217004		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	ibility company here:	
LARGO CUSTOM POOLS, LLC		
The new name must be distinguishable and contain the words "Limited Lia	bility Company," the designation "LI	.C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	e address on our records, <u>ent</u>	er the name of the new registered
Name of New Registered Agent:		
N. D. C. LOSS ALL		
New Registered Office Address:	Emer Florida street addi	522
	City , 1	Florida 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	<u>Name</u>	<u>Address</u>	Type of Action
			□Remove
			Change
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			Remove
			Change
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			Change
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f an effe Note: T	re date, if other than to ctive date is listed, the date if the date inserted in this nt's effective date on the	must be specific an s block does not	nd cannot be prior meet the applic	able statutory filir	iore than 90 days aft		
	ord specifies a dela 90th day after the r			t an effective	time, at 12:01	a.m. on the earl	ier of
	October 4		2023	·			
Dated _				1			
Dated _	mi	Signature of a	member or author	orized representative	af a member		

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