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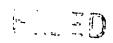
## **COVER LETTER**

Registration Section Division of Corporations

TO:

SUBJECT: Golden Knight	t il Umbing CLC iability Company
The enclosed Articles of Amendment and fee(s) are submitted	d for filing.
Please return all correspondence concerning this matter to the	following:
Paul C	
Golden Kn	Right Plunking LLC
1860 SE	3 rd St
Pampuno L	Address  3 each Fl 33060  y/State and Zip Code  ht Dlumbing Dyahov - Com  used for future annual report notification)
golden Knig E-mail address: (10 be 1	ised for future annual report notification)
For further information concerning this matter, please call:	
Aul Clapp	at (808) 347-0023 Area Code Daytime Telephone Number
Name of Person	Area Code Daytime Telephone Number
Enclosed is a check for the following amount:	
□ \$25.00 Filing Fee □ \$30.00 Filing Fee & □ Certificate of Status	\$55.00 Filing Fee &  Certified Copy (additional copy is enclosed)  \$\sum_{\text{S60.00 Filing Fee}, \text{Certificate of Status & Certified Copy (additional copy is enclosed)}} \$\sum_{\text{S60.00 Filing Fee}, \text{Certified Copy (additional copy is enclosed)}} \$\sum_{\text{S60.00 Filing Fee}, \text{Certified Copy (additional copy is enclosed)}} \$\sum_{\text{S60.00 Filing Fee}, \text{Certified Copy (additional copy is enclosed)}} \$\sum_{\text{S60.00 Filing Fee}, \text{Certified Copy (additional copy is enclosed)}} \$\sum_{\text{S60.00 Filing Fee}, \text{Certified Copy (additional copy is enclosed)}} \$\sum_{\text{S60.00 Filing Fee}, \text{Certified Copy (additional copy is enclosed)}} \$\sum_{\text{S60.00 Filing Fee}, \text{Certified Copy (additional copy is enclosed)}} \$\sum_{\text{S60.00 Filing Fee}, \text{Certified Copy (additional copy is enclosed)}} \$\sum_{\text{S60.00 Filing Fee}, \text{Certified Copy (additional copy is enclosed)}} \$\sum_{\text{S60.00 Filing Fee}, \text{Certified Copy (additional copy is enclosed)}} \$\sum_{\text{S60.00 Filing Fee}, \text{Certified Copy (additional copy is enclosed)}} \$\sum_{\text{S60.00 Filing Fee}, \text{Certified Copy (additional copy is enclosed)}} \$\sum_{\text{S60.00 Filing Fee}, \text{Certified Copy (additional copy is enclosed)}} \$\sum_{\text{S60.00 Filing Fee}, \text{Certified Copy (additional copy is enclosed)}} \$\sum_{\text{S60.00 Filing Fee}, \text{Certified Copy (additional copy is enclosed)}} \$\sum_{\text{S60.00 Filing Fee}, \text{Certified Copy (additional copy is enclosed)}} \$\sum_{\text{S60.00 Filing Fee}, \text{Certified Copy (additional copy is enclosed)}} \$\sum_{\text{S60.00 Filing Fee}, \text{Certified Copy (additional copy is enclosed)}} \$\sum_{\text{S60.00 Filing Fee}, \text{Certified Copy (additional copy is enclosed)}} \$\sum_{\text{S60.00 Filing Fee}, \text{Certified Copy (additional copy is enclosed)}} \$\sum_{\text{S60.00 Filing Fee}, \text{Certified Copy (additional copy is enclosed)}} \$\sum_{\text{S60.00 Filing Fee}, Certified Copy (addition
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: 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



, GOLDEN KNIGH	T PLUMBING LLC 2023 HAY -8 AH 7: 33
(Name of the Limited Liability Compa (A Florida Limited)	ny as it now appears on our records.)
The Articles of Organization for this Limited Liability Company Florida document number <u>L2200098555</u> .	
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 Liabi	lity Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:  (Principal office address MUST BE A STREET ADDRESS)	1860 SE 31d St Pompeno Beach, FI 33060
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)	1860 SE 3rd St Pompu-o Berch, F1 3306
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 name of the new registere</u>
Name of New Registered Agent:  New Registered Office Address:	/ Enter Florida street address
	, Florida

## 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 Type of Action Name **Address** MGR Kurina Clapp 1860 SE 31d St ZAdd Pompano Beach, FI DRemove 33060 Change MGR CISCO Oliveira 3933 NW 55th St DANG Cocont Creek, Fl DRemove 33073 \_\_\_\_\_Change \_\_\_\_\_ 🗀 Add Remove \_\_\_\_\_ Change \_\_\_\_\_ □Add Remove Change □Add □Remove \_\_\_\_\_ Change □Add □Remove

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	date, if other than the date of filing: 120 20 (optional) ve date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605,020
	he date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as 's effective date on the Department of State's records.
record sp	pecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
	5-2-23
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ated <u> </u>	french fwg
vated <u> </u>	Signature of a member or authorized representative of a member