## L22 000 218 073

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

Office Use Only



300400015853

01/13/23--01021--013 \*\*60.00

## **COVER LETTER**

TO:

Registration Section

Tallahassee, FL 32314

Division of Con	rporations		
	Plumbing LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Roberto F Gonzalez		
		Name of Person	<del></del>
	R & F Elite Plumbing LLC		
		Firm/Company	
	212 palmetto ave		~1
		Address	
	crescent city FL 32112		
		City/State and Zip Code	<del></del> - ವ
	r_fplumbing@yahoo.com	,	: · · · · · · · · · · · · · · · · · · ·
	E-mail address: (	to be used for future annual report notifi	cation)
For further information of	concerning this matter, please ca	all:	
Roberto F Gonzalez		386 5592825 at ( )	
Name o	of Person		Telephone Number
Enclosed is a check for t	he following amount:		
□ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addre		Street Address:	
<del>-</del>		<del>-</del>	
	-	-	
Mailing Address Registration Division of C P.O. Box 632	Section Corporations	Street Address: Registration Sec Division of Corp The Centre of Ta	porations

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

iability Company as it now appears on lorida Limited Liability Company)	our records.)
lity Company were filed on $\frac{5-08-20}{100}$	and assigned
<u>.                                    </u>	
ng:	
e limited liability company here:	
"Limited Liability Company," the design	ation "LLC" or the abbreviation "L.L.C."
<u> </u>	
DDRESS)	
	e.) 
	*** <u></u>
	· · · · · · · · · · · · · · · · · · ·
x) —————	~-;
<u> </u>	:: N
<del> </del>	ယ
tered office address on our recor ere:	ds, enter the name of the new regist
p., m	
Enter Florida si	
Cin.	, Florida Zip Code
	itered office address on our recor

## 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
AMBR	Roberto F Gonzalez	212 palmetto ave crescent city fl 32112	■ Add
			□ Remove
			□Add
			□Remove
			Change
			 <u></u>
			∷
			□Change
			□Add
			Remove
			□Change
<del></del>			□Add
		<del> </del>	□Remove
			Change
			□Remove

□ Change

<del>-</del>		<del></del> -
	<u> </u>	
<del></del>		
	****	
<del></del>	· <del>-</del>	<del></del>
		-
		<u> </u>
<del></del>	<u> </u>	
	<u> </u>	1
<u> </u>	<del></del>	
ctive date, if other than t	he date of filing:	(optional)
		te of filing or more than 90 days after filing.) Pursuant to 605.02 statutory filing requirements, this date will not be listed
	Department of State's records.	, ,
ord specifies a delayed effectiled.	tive date, but not an effective time, a	at 12:01 a.m. on the earlier of: (b) The 90th day after the
january I	2023	
ed	·	
	Dayland Benefit of authorized	

Typed or printed name of signee