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TO:

TO: Registration Section Division of Corporations								
214 786 FT	4 1711	Plum	bing No	rds Retail, LLC				
SUBJE	C1:			Name	Limited Liability Company			
The enc	losed	Artic	les of A	mendment and fee(s) a	submitted for filing.			
Please r	etuen	all co	теѕроп	dence concerning this r	itter to the following:			
				Frank J. Aloia, Jr., E				
					Name of Person	1		
Aloia Roland Lubell &			Aloia Rotand Lubell	: Morgan, PLLC				
				Firm/Company		, ,		
				2222 Second Street				
					Address			
				Fort Myers, FL 3390				
					City/State and Zip C	lode		
				faloia@lawdefined.co		375	toX	
					ss: (to be used for future an	mai report notifica	ation)	
For furt	her in	forma	tion cor	eccrning this matter, ple	se call:			
Frank J. Aloia, Jr., Esq.				239 at (791-7950)			
,			ame of I	Person	Area Code	Daytime T	elephone Number	
Enclose	d is a	check	for the	following amount:				
∓ \$25	.00 F	iling l	ec .	(1) \$30.00 Filing Fee & Certificate of Stat	☐ \$55.00 Filing Is Certified Copy (additional copy is	у	S60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclo	
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, F1, 32314			rporations	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

FILED 2022 SEP 26 PM 12: 49

Plumbing Nords Retail, 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 Company were filed on $\frac{5/12/2022}{1}$ and assigned Florida document number _____L22000224671 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Plumbing Nerds MFG, LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 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 OFFICH BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address _, Florida _ City 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

	uthorized Person(s) authorize om our records:	ed to mana	age, <u>enter the title, name, and address of each p</u>	erson being added
MGR = Man AMBR = Auti	ager norized Member			
<u>Title</u>	Name		Address	Type of Action
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