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## **COVER LETTER**

TO: Registration Se Division of Con					
	umbing, LLC				
SUBJECT:	Name of Lin	nited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
	Todd B. Allen, Esq.				
		Name of Person			
	Lindsay & Allen, PLLC				
	<del> </del>	Firm/Company	<u> </u>		
	5692 Strand Court, Suite	I			
		Address			
	Naples, FL 34110		2073 OCT 3		
		City/State and Zip Code			
	Todd@naples.law		<u>ت</u> تر.		
	E-mail address: (	to be used for future annual report notif	ication)		
For further information of	oncerning this matter, please o	all:	<b>r</b>		
Todd B. Allen, Esq.		239 593-7900 at ()	7 <u>.</u>		
Name o	f Person		Telephone Number		
Enclosed is a check for t	he following amount:				
■ \$25.00 Filing Fee	S30.00 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 Addres		Street Address:			
Registration Section Division of Corporations		Registration Section			
P.O. Box 632	-	Division of Corp The Centre of Ta			
Tallahassee,			Street, Suite 810		

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SPARTAN PLUMBING, LLC			
(Name of the Limited Liability Company as it now appear (A Florida Limited Liability Company)	s on our records.)		
The Articles of Organization for this Limited Liability Company were filed on 10. Florida document number L22000443663	and assigned		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liability company he	<u>:re</u> :		
The new name must be distinguishable and contain the words "Limited Liability Company," the d	esignation "LLC" or the abbreviation "L.L.C."		
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)	5 76		
	<u> </u>		
Enter new mailing address, if applicable:	<u> </u>		
(Mailing address MAY BE A POST OFFICE BOX)	11 TO 124		
	71. 22		
<del></del>	<del>်</del>		
B. If amending the registered agent and/or registered office address on our re	<u> </u>		
agent and/or the new registered office address here:	-		
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street address		
	Etavida		
City	, 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 c	canacia. I further agree to comply with t		
r nereny accept the appointment as registered agent and agree to act in this to provisions of all statutes relative to the proper and complete performance of			

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

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	JEREMY GUTHRIE	14671 Adina Lane	
		Fort Myers, FL 33905	□Remove
			☐ Change
			□ Add
			[]Change
			□Add
			S. C. Remove
			Cromange
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Effective date, if other	er than the da	te of filing:	10/25/23			(optior	ıal)	
f an effective date is listed Note: If the date insert	, the date must be	specific and c	annot be prior	to date of filin	g or more than	90 days after fi	ling.) Pursuant	to 605.0207
document's effective de	ate on the Depar	rtment of Sta	te's records		y ming requi	emena, ma	mw will not	De nated as
e record specifies a dela rd is filed.	yed effective da	ate, but not a	n effective t	ime, at 12:01	a.m. on the c	earlier of: (b)	The 90th da	y after the
October 25			2023					
Jaicu		2//	<del>&gt;)</del>					
				<del></del>	ntative of a me	,		

Filing Fee: \$25.00