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(F	Requestor's Name)	
(A	Address)	
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٩,	(ddress)	
- (C	City/State/Zip/Phone #)	
PICK-UP	■ WAIT	MAIL
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(D	Pocument Number)	
Certified Copies	Certificates o	f Status
		
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Special Instructions to Fi	ling Officer:	
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COVER LETTER

	Registration Se Division of Cor			
SUBJECT	Hi-Tech Me	chanical, LLC	·	
SOBJECT	·	Name of Limi	ited Liability Company	
The enclos	sed Articles of .	Amendment and fee(s) are subt	nitted for filing.	
		Winthrope Barnett		
			Name of Limited Liability Company and fee(s) are submitted for filing. ming this matter to the following: Barnett Name of Person Jechanical, LLC Firm/Company Jina Ave Address Jason City/State and Zip Code January Jan	
		HI-Tech Mechanical, LLC		Daytime Telephone Number \$60.00 Filing Fee, Certificate of Status & Certified Copy
			Firm/Company	
		708 E Virgina Ave		
			Address	
		Tampa, Fl 33601		
		winthropwinnie@gmail.com	·	
		· · · · · · · · · · · · · · · · · · ·		fication)
For further	r information co	oncerning this matter, please ca	dl:	
Winthrop	Barnett			
	Name of	[°] Person	Area Code Daytim	e Telephone Number
Enclosed i	s a check for th	e following amount:		
□ \$25.00) Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	Certified Copy	Certificate of Status & Certified Copy

Mailing Address:
Registration Section
Division of Corporations P.O. Box 6327

Street Address: Registration Section Division of Corporations The Centre of Tallahassee

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Hi-Tech Mechanical, LLC		
(Name of the Limited Liability Co (A Florida Lin	ompany as it now appears on our records.) lited Liability Company)	
he Articles of Organization for this Limited Liability Complorida document number L22000458274	pany were filed on October 25, 2022	and assigned
his amendment is submitted to amend the following:		
. If amending name, enter the new name of the limited	liability company here:	
he new name must be distinguishable and contain the words "Limited	Liability Company," the designation "LLC" or the	abbreviation "L.L.C."
nter new principal offices address, if applicable:		<u> </u>
Principal office address MUST BE A STREET ADDRES	<u></u>	
	<u> </u>	
inter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
 If amending the registered agent and/or registered of gent and/or the new registered office address here: 	ffice address on our records, <u>enter the n</u>	ame of the new registe
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Florida	
	Cuv , Fiorida	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 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	Winthrop Barnett	708 E Virgina Tampa, F l 33601	≣ Add
			□Remove
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Remove
			□Change
			□Add

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45-4	WHITH THE TAX DOTA	-	ive date, but not an effective	e time. at 12:01 a.m. or	the earlier of: (b) The 90	Oth day after the
49-4	WHITH THE RESERVE TO THE TOTAL PROPERTY OF A MEMBER OF	Dated	2022	·		
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