## L23000077741

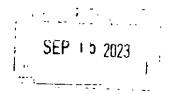
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
Nox
/\
10-13

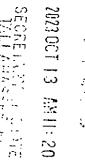




300414619453

10/18/23--01009--006 \*\*55.00





## **COVER LETTER**

TO: Registration Se Division of Cor		, *	
SUBJECT:	Humphacy Plym	bing LLC Ciabile Company	
	,		
The enclosed Articles of	Amendment and fee(s) are submit	ted for filing.	
Please return all correspo	ondence concerning this matter to	the following:	
	Te	KAY Humphac	/
		Phary Plymbing Find Company	
	4680 P	Vaoidy Rd 5v	
	Englewood	FL 24	224 E
		City/State and Zip Code  Office 25 of the month of the code of the	cation)
For further information c	concerning this matter, please call:		
- Jenny	Hymphacy	at ( <u>\$178)</u>	14/00 Telephone Number
Enclosed is a check for the	he following amount:		
☐ \$25.00 Filing Fee	(1) \$30,00 Filing Fee & Certificate of Status	7 \$55,00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
<u>Mailing Addres</u> Registration (		Street Address: Registration Sect	tion
Division of C P.O. Box 632	Corporations	Division of Corp The Centre of Ta	orations

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

No\$

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

HumphRey Num	bing LLC
( <u>Name of the Limited Viability Compa</u> (Alclorida Limited I	ny as (thow appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number	were filed on
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 Liabil	lity Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	Homphany Numbing LLL 4680 Placida Rd Suite G
(Principal office address MUST BE A STREET ADDRESS)	4680 Placida Rd Suit Es G
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)	Humphary Plumbing LPC PO Box 129 Placida FL 33946
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our records, enter the name of the new registered
Name of New Registered Agent: 1	EARY Humphney
New Registered Office Address: 147	Endigo Rd Endorda street address
Rotun	da West Florida 33947  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 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
			□ Add
			Remove
			□Change
			🗆 Add
			□ Remove
			□Add
			202 OCT 13
			Add
			□ Change
		-	□Add
			□Remove
		·	□ Change
			□ Add
			□Remove
			□Chance

and the second of the second o

				· · · · · · · · · · · · · · · · · · ·			
<del></del>						<del></del>	
	·						
·						2023	
			<del></del>		:- <i>[ii]</i> >:-	CCT	#==== d 
		·			<u> </u>	ယ	: :
					***		ز : وجده ۱۰ الســــــــــــــــــــــــــــــــــــ
						: 20	
	· · · · · · · · · · · · · · · · · · ·						
fective date, if other the effective date is listed, the	an the date of filin	g:	Anto of Elina or m	(opt	ional)	and the second second	. 405 0
ote: If the date inserted in cument's effective date of	i this block does not i	meet the applical					
	, , ,						
ecord specifies a delayed is filed.	effective date, but no	t an effective tim	e, at 12:01 a.m. c	n the earlier of: (	b) The 9	0th day	after t
	1						
acd	2023		_ •				

Filing Fee: \$25.00