

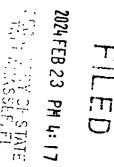
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## Tax Professional Services, LLC

A Financial Services Corporation 1105 W Maple Ave Geneva, Al. 36340 334-684-6398 334-684-7193 -fax www.taxprollc.com

Members: National Society of Accountants, National Association of Enrolled Agents, National Society of Tax Professionals, American Society of Problem Solvers

February 19, 2024

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

To whom it may concern,

Enclosed you will find: original and one copy of Articles of Amendment to Articles of Organization & check for payment.

Please register the enclosed Articles of Amendment to Articles of Organization for TRIPLE CROSS CONSTRUCTION SERVICES, LLC and return the recorded Articles to us.

Thank you,

Ulli Steiner Tax Professional Services, LLC

Enc.

Cert#: 7022 2410 0001 5305 9267

## **COVER LETTER**

on Section f Corporations		
LE CROSS CONSTRUCTION SER	RVICES, LLC	
Name of Lim	nited Liability Company	
es of Amendment and fee(s) are sub	bmitted for filing.	
respondence concerning this matter	to the following:	
Ulli Steiner		
<del></del>	Name of Person	
Tax Professional Services,	, LLC	
<u></u>	Firm/Company	
1105 W Maple Ave		
<del></del>	Address	
Geneva, AL, 36340		
-	City/State and Zip Code	
ulli@taxprolle.com		
ion concerning this matter, please c	call:	
	334 684-6398	
nme of Person	Area Code Daytime Telephone Number	<b></b>
for the following amount:		
ce S30.00 Filing Fee & Certificate of Status	(additional copy is enclosed) Certified	ie of Status &
Idress: ion Section	Street Address: Registration Section	
of Corporations	Division of Corporations	
6327 ee. FL 32314	The Centre of Tallahassee 2415 N. Monroe Street. Suite 8	10
	E CROSS CONSTRUCTION SEE  Name of Lin  Per of Amendment and fee(s) are subsessed of Amendment and fee(s) are subsessed in the services of Amendment and fee(	E CROSS CONSTRUCTION SERVICES, LLC  Name of Limited Liability Company  es of Amendment and fee(s) are submitted for filing.  respondence concerning this matter to the following:  Uili Steiner  Name of Person  Tax Professional Services, LLC  Finn/Company  1105 W Maple Ave  Address  Geneva, AL, 36340  City/State and Zip Code  ulli@taxprollc.com  E-mail address: (to be used for future annual report notification)  ion concerning this matter, please call:  at (

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

TRIPLE CROSS CONSTRUCTION S	ERVICES, LL	C		
(Name of the Limited I	Liability Comp: Florida Limited	iny as it now appears on o Liability Company)	ur records.)	
The Articles of Organization for this Limited Liabi Florida document number 123000215455	ility Company	were filed on 05/01/20	23	and assigned
This amendment is submitted to amend the following	ing:			
A. If amending name, enter the new name of th	e limited liab	ility company here:		
Easy Peazy Plumbing, LLC				
The new name must be distinguishable and contain the word	s "Limited Liabi	lity Company," the designa	tion "LLC" or the abbr	eviation "L.L.C."
Enter new principal offices address, if applicable:		N/A	,	202
Principal office address MUST BE A STREET A	(DDRESS)		25	- <del> </del>
				, <del>w</del>
Enter new mailing address, if applicable:		N/A		3 PH D
(Mailing address MAY BE A POST OFFICE BOX)			', 'e	<u> </u>
				Ħ <b>-</b>
B. If amending the registered agent and/or regi agent and/or the new registered office address b		address on our record	ls, enter the name	of the new register
Name of New Registered Agent:	N/A		···	
New Registered Office Address:	N/A			
		Enter Florida str	rect address	
_			Florida	
		City		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>	Name	Address	Type of Action
			□Add
			□Remove
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fective date, if other th	an the date of filing:			(optic	angl)	
n effective date is listed, the coter. If the date inserted in	late must be specific and cannot this block does not meet the the Department of State's	e applicable	ate of filing or mor Statutory filing	e than 90 days after	filing ) Pursuant to 60	5.020 ted :
ecord specifies a delayed of s filed.	ffective date, but not an eff	ective time,	at 12:01 a.m. on	the earlier of: (b)	) The 90th day after	er the
February 16	2024	4				
Shu	A ROUL Signature of a member	or authorized	representative of	a member		
Shelby B Ramer	<u> </u>		-1			
· · · · · · · · · · · · · · · · · · ·		or printed na				

Filing Fee: \$25.00