

L23000461901

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

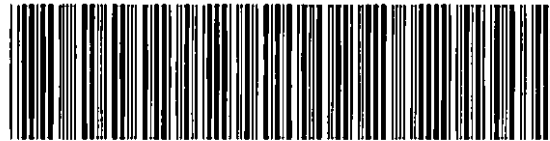
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SECRETARY OF STATE
TALLAHASSEE, FL
DIVISION OF CORPORATIONS
OFFICE
TALLAHASSEE, FLORIDA

OCT 20 2023

COVER LETTER

TO: Registration Section
Division of Corporations

MYERS SEPTIC AND WATER LLC

SUBJECT: _____
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

JASON PIGOTT JR

Name of Person

MYERS SEPTIC AND WATER LLC

Firm/Company

12581 METRO PKWY, UNIT 24

Address

FORT MYERS, FL 33966

City/State and Zip Code

JASON@TRINITYSWFL.COM

E-mail address: (to be used for future annual report notification)

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SECRETARY OF STATE
TALLAHASSEE FL

For further information concerning this matter, please call:

JASON PIGOTT JR

239 327-1489

at (_____) _____

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$30.00 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 Address:

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

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**

MYERS SEPTIC AND WATER LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

FILED
2024 OCT 20 PM 3:10
SECRETARY OF STATE
TALLAHASSEE, FL

The Articles of Organization for this Limited Liability Company were filed on 08/28/2023 and assigned

Florida document number L23000401901

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

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 OFFICE 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 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>	<u>Address</u>	<u>Type of Action</u>
MGR	NICK GHANEM	4632 DEL PRADO BLVD S	<input type="checkbox"/> Add
		UNIT B	<input checked="" type="checkbox"/> Remove
		CAPE CORAL, FL 33904	<input type="checkbox"/> Change
MGR	ROBERT BELLFLOWER	4632 DEL PRADO BLVD S	<input type="checkbox"/> Add
		UNIT B	<input checked="" type="checkbox"/> Remove
		CAPE CORAL, FL 33904	<input type="checkbox"/> Change
MGR	ZACHARY MYERS	4632 DEL PRADO BLVD S	<input type="checkbox"/> Add
		UNIT B	<input type="checkbox"/> Remove
		CAPE CORAL, FL 33904	<input checked="" type="checkbox"/> Change
MGR	JASON PIGOTT JR	12581 METRO PKWY	<input type="checkbox"/> Add
		UNIT 24	<input type="checkbox"/> Remove
		FORT MYERS, FL 33966	<input checked="" type="checkbox"/> Change
MGR	BRYCE A. HOFFMANN	12581 METRO PKWY	<input type="checkbox"/> Add
		UNIT 24	<input type="checkbox"/> Remove
		FORT MYERS, FL 33966	<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

This image shows a single sheet of white paper with horizontal blue or grey ruling lines, typical of notebook paper. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Dated October 19, 2023.


Signature of a member

Typed or printed name of signee

Filing Fee: \$25.00