Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CONTRACTORS REPORTING SERVICES, INC.

Account Number : I20050000099 Phone : (813)932-5244 Fax Number : (813)932-3782

Triter the email address for this business entity to be used for future

annual report mailings. Enter only one email address please.*

info@activatemylicense.com Email Address:___

高可LLC AMND/RESTATE/CORRECT OR M/MG RESIGN MALI PLUMBING, LLC

Certificate of Status	0
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Page Count	05
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COVER LETTER

TO: Registration Se Division of Cor			
SUBJECT: MALIPE	LUMBING,LLC		
	Name of Lim	ated Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	JANINE MITCHELL		
		Name of Person	
	CONTRACTORS R	EPORTING SERVI	CE INC
		Firm/Company	
	23110 SR 54, PMB	336	
		Address	·
	LUTZ, FL 33549		
		City/State and Zip Code	
	info@activatemylice	nse.com	
	E-mail address: (to be used for future annual r	eport notification)
For further information c	oncerning this matter, please c	all:	
JANINE MITCHEL	L	813 93	32-5244
Name o	f Person	Area Code	Daytime Telephone Number
Enclosed is a check for the	ne following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee &	☐ \$55.00 Filing Fee &	□ \$60.00 Filing Fee,
= 325.00 thing tee	Certificate of Status	Certified Copy (additional copy is encl	Certificate of Status &

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

11/11/2024 11:44 AM 27 3))

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED 2024 KOV 12 AH 10: 00

MALI PLUMBING,LLC		110100
(Name of the Limited Liability Con	npany as it now appears on our records. Led Liability Company)	<u> </u>
(A FIORIGA LIMITO	ed classific Company	AMASSEE, FLORITA
The Articles of Organization for this Limited Liability Compa		
lorida document number L23000472463		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited li	ability company here:	
MALI PLUMBING AND MECHANICAL, LLC		
The new name must be distinguishable and contain the words "Limited Li	ability Company," the designation "LLC" o	r 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)		
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
3. If amending the registered agent and/or registered offic	ce address on our records, <u>enter th</u>	e name of the new registo
gent and/or the new registered office address here:		
Name of New Registered Agent:		
New Registered Office Address:		
- Company of the control of the cont	Enter Florida street address	
	. Flori	da
	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

MGR = Manager

11/11/2024 11:44 AM Page: 5 of 6

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

<u>Title</u>	<u>Name</u>	Address	Type of Action
			□Add
			□Remove
			☐ Change
			□Add
			□Remove
			☐ Change
			□Add
			□ Remove
			☐ Change
			□Add
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rice .			
(If an ef <u>Note:</u>	ve date, if other than the date of filing: ective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 day If the date inserted in this block does not meet the applicable statutory filing requirement ent's effective date on the Department of State's records.	(optional) s after filing.) Pursuant to 60 ts, this date will not be lis	05.0207 (3)(sted as the
the recordered	I specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier ed.	of: (b) The 90th day aft	er the
	11/8/2024		
Dated	DocuSinned by		
	Signature of a member A023DCA40C084F0 : of a member		
	Consideration of the manufacture of the constraint of the constrai		

Typed or printed name of signee