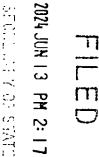
(F	Requestor's Name)	_
(A	ddress)	
(Å	ddress)	<u>.</u>
(C	ity/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(E	Business Entity Name)
(C	ocument Number)	
Certified Copies	Certificates o	of Status
Special Instructions to	o Filing Officer:	
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Office Use Only



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COVER LETTER

TO: Registration Se Division of Cor			
SUBJECT:	Leahy's Repipe a	nd Plumbling, LLC	
	Name of Lim	ited Liability Company	
The enclosed Articles of a	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
		Kevin Patrick Leahy	
		Name of Person	
		Leahy's Repipe and Plumbing, LL	с
		Firm/Company	
		5402 Parkway Dr	
		Address	
		Belle Isle, FL 32809	
		City/State and Zip Code	
		ysrepipeandplumbing@gmail.com to be used for future annual report noti	fleation)
For further information co	oncerning this matter, please c	all:	
Kevin Patrick	Leahy	407 433 –1850	
Name of	Person	at () Area Code Daytim	e Telephone Number
Enclosed is a check for th	e following amount:		
□ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy tadditional 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

Leahys Repipe and Plumbling, LLC			
(<u>Name of the Limited Liability Compa</u> (A Florida Limited I	ny as it now appears on our records. Liability Company))	
The Articles of Organization for this Limited Liability Company	were filed on May 17th, 2024	and assigned	
Florida document number L24000230335			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ility company here:		
Leahys Repipe and Plumbing, LLC			
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:	5402 Parkway Dr		
Principal office address MUST BE A STREET ADDRESS)	Belle Isle, FL 32809	2024	
		<u> </u>	
Enter new mailing address, if applicable:	5402 Parkway Dr	g m	
Mailing address MAY BE A POST OFFICE BOX)	Belle Isle, FL 32809	7 7	
Maning address MAT DE ATTOM OF THE BOAY			
3. If amending the registered agent and/or registered office a sgent and/or the new registered office address here:	address on our records, <u>enter t</u>	he name of the new regist	
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street address		
	, Flor		
	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>	Address	Type of Action
			□Add
			□Remove
			□Change
			□ Add
			□Remove
		-	□Change
			□Add
			□Remove
			□Change
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□ Add
			□Remove
			□Chana.

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) EMAIL ADDRESS: leahysrepipeandplumbing@gmail.com E. Effective date, if other than the date of filing: ________(optional) (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) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed. 2024 Dated Signature of a member or authorized representative of a member

Typed or printed name of signee

Kevin Patrick Leahy