L25000076924

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C/ 6/3/2025

COVER LETTER

TO: Registration So Division of Cor					
SUBJECT: Pie's Pool !	Services LLC				
(OD311X.1)	Name of Lin	ited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
	Ryan Pietraszka				
	·	Name of Person			
	Pie's Pool Services EL.C				
		Firm Company			
	27412 Anguila Lane				
		Address			
	Ramrod Key, Florida 330				
	ryankey0727@gmail.com	City/State and Zip Code			
	- ·	to be used for future annual report noti	itication)		
For further information c	concerning this matter, please c	all:			
Ryan Pietraszka		at (305) 315-6752			
Name o	of Person	at (305) 315-6752 Area Code Daytim	ne Telephone Number		
Enclosed is a check for the	ha fallawina anyony				
□ \$25.00 Filing Fee	■ \$30.00 Filing Fee &	☐ \$55,00 Filing Fee &	☐ \$60.00 Filing Fee.		
	Certificate of Status	Certified Copy radoutional copy is enclosed:	Certificate of Status & Certified Cupy radditional copy is enclosed)		
Mailing Addres		Street Address:			
Registration Section Division of Corporations			Registration Section		
Division of C P.O. Box 632		Division of Cor The Centre of T			
Tallahassee,			oe Street, Suite 810		
·		Tallahassee, FL			

1/2/2025 2:42 DM

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2025 APR 14 PM 4: 49 Pie's Pool Services LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on February 13, 2025 and assigned Florida document number L25000076924 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 "LLC." 27412 Anguila Lane Enter new principal offices address, if applicable: Ramrod Key, Florida 33042 (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: Ryan Pietraszka Name of New Registered Agent: 27412 Anguila Lane New Registered Office Address: Enter Florida street address _____, Florida 33042 Ramrod Key

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.

Ryan Pietraszka

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager

* AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
			□Remove
			□Change
			□Add
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			□Change
			□Add
			□Remove
			□Change

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D. If amending any other in	formation, enter chang	ge(s) here: (Attach	additional sheets, if ne	cessary.)	
	<u>,</u>				
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		-			
E. Effective date, if other the (If an effective date is listed, the same interest of the date inserted in document's effective date of	date must be specific and cannot this block does not meet	the applicable statute	ing or more than 90 days aft	tional) er filing.) Pursuant to 605.02 ris date will not be listed a	07 (3)(t is the
f the record specifies a delayed decord is filed.	effective date, but not an e	effective time, at 12:0	H a.m. on the earlier of: ((b) The 90th day after th	e
Dated April 7	. 20	025	,		
	Ryan	Puetr	raszka	,	
	Signature of a memb	ber or authorized repre-	sentative of a member		
Ryan Pietraszka					
 	Typ	ed or printed name of:	ignee		

Filing Fee: \$25.00