P07000073841

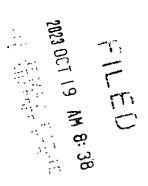
	(Requestor's Name)
	(Address)
	(Address)
-	(City/State/Zip/Phone #)
PICK-UP	WAIT MAIL
	(Business Entity Name)
	(Document Number)
Certified Copies	Certificates of Status
Special Instructions to	Filing Officer:

Office Use Only



100417583181

amena



RECEIVED

OCT 19 PM 3: 9

A. RAMSEY

FLURIDA CAPITAL COURIER SERVICES	, INC
2330 CLARE DR	
TALLAHASSEE, FL 32309	
(850) 524–5437 / (850) 524–6243 / (85	50) 491–9625
Please use funds from this ac	count: I20210000160: \$35.00
Authorization Signature:	famifalle :
LIVE OAK PLUMBING INC	P07000073841
BUSINESS NAME	DOCUMENT #
Certified Copy	
Certificate of Status	
NEW FILINGS	<u>AMMENDMENTS</u>
Profit Corp	_x_Amendment
Not for Profit	Resignation of R.A. Officer/Director
Limited Liability	Change of Registered Agent
Domestication	Revocation of Dissolution
LLLP	Merger
CORP	Articles of Conversion
Other	Restated Articles of Incorporation
Other	Statement of Authority
OTHER FILINGS	REGISTERATION/QUALIFICATIONS
Apostille	Foreign filing
Country	Reinstatement
Annual Report	Qualification
Fictitious Name	Other

EXAMINER'S INITIALS:____

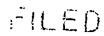
COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF COI	RPORATION: LIVE OAK PLUM	BING INC	
DOCUMENT N	D07000070044		
The enclosed Arr	ticles of Amendment and fee are su	bmitted for filing.	
Please return all	correspondence concerning this ma	tter to the following:	
	Devonte Sykes		
		Name of Contact Persor	
	LIVE OAK PLUMBING INC	;	
		Firm/ Company	
	150-A/B Palm St NE		
		Address	
	LIVE OAK, FL 32064		
		City/ State and Zip Code	
	info@liveoakplumbing.com	1	
	•	sed for future annual report	notification)
	is-mail address. (to be us	sed for future annual report	notification)
For further infor	mation concerning this matter, pleas	se call:	
Devonte Sykes		at (<u>443</u>	244-2675
N	ame of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a che	cck for the following amount made	payable to the Florida Depa	artment of State:
\$35 Filing F	ee	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
	Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Amend Divisio The Co	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, Fl. 32303

Articles of Amendment to Articles of Incorporation of



LIVE OAK PLUMBING INC	2023 OCT 19 AM 8: 38
(Name of Corporation as current	tly filed with the Florida Dept. of State)
P07000073841	PACHERARY OF STAIR 14 AHARSER FROM
(Document Number of	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". "chartered," "professional association," or the abbreviation "P.A.	'company," or "incorporated" or the abbreviation "Corp.," A professional corporation name must contain the word
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	150-A/B Palm St NE
	LIVE OAK, FL 32064
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address	
Name of New Registered Agent	
(Florida st	treet address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familiar	t: with and accept the obligations of the position.
Signature of New I	Registered Agent, if changing
Check if applicable	

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe. PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	VPS	Adrian A Swanigan	150-A/B PALM ST NE
Add			LIVE OAK, FL 32064
X Remove			
2) Change			
Add			
Remove Change			
Add			
Remove			
4) Change	<u></u>	-	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	nding or adding additional Art additional sheets, if necessary).	(Be specific)			
<u> </u>					
		<u>-</u> -			
	· · · · · · · · · · · · · · · · · · ·				· · · · · · · · · · · · · · · · · · ·
				·	
<u> </u>					<u> </u>
lf an ai	nendment provides for an excl	range, reclassificati	ion, or exacellation	of issued shares	
provis	mendment provides for an exclusions for implementing the ame for implementing the ame	nange, reclassificati indment if not cont	ion, or cancellation ained in the amend	of issued shares, ment itself:	
provis	ions for implementing the ame	hange, reclassificati indment if not cont	ion, or cancellation ained in the amend	of issued shares, ment itself:	
provis	ions for implementing the ame	hange, reclassificati indment if not cont	ion, or cancellation ained in the amend	of issued shares, ment itself:	v 1 - 1444 1
provis	ions for implementing the ame	hange, reclassificati endment if not cont	ion, or cancellation ained in the amend	of issued shares, ment itself:	
provis	ions for implementing the ame	hange, reclassificati endment if not cont	ion, or cancellation ained in the amend	of issued shares, ment itself:	
provis	ions for implementing the ame	hange, reclassificati	ion, or cancellation ained in the amend	of issued shares, ment itself:	
provis	ions for implementing the ame	hange, reclassificati	ion, or cancellation ained in the amend	of issued shares, ment itself:	
provis	ions for implementing the ame	hange, reclassification	ion, or cancellation ained in the amend	of issued shares, ment itself:	

.

The date of each amend date this document was s	ment(s) adoption:, if other than the
date this document was 5	10/18/23
Effective date if applica	le:
	in this block does not meet the applicable statutory filing requirements, this date will not be listed as the on the Department of State's records.
Adoption of Amendmen	(s) (<u>CHECK ONE</u>)
☐ The amendment(s) was action was not require	/were adopted by the incorporators, or board of directors without shareholder action and shareholder .
	/were adopted by the shareholders. The number of votes cast for the amendment(s) s/were sufficient for approval.
	were approved by the shareholders through voting groups. The following statement vided for each voting group entitled to vote separately on the amendment(s):
"The number of	rotes cast for the amendment(s) was/were sufficient for approval
by	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
,	(voting group)
1 Dated_	0/18/23
Signatu	e (By a director, president or other officer – if directors or officers have not been
	selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
	Devonte Sykes
	(Typed or printed name of person signing)
	President

(Title of person signing)