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## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: Orlando Party Line. com LLC (Name of Dimited Liability Company)
(Name of Limited Liability Company)
L04000047417
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Steven Arnold John (Name of Person)
Steven's Electric of Naples (Firm/Company)
18535 Royal Hammock Blvd (Address)
Naples, FL 34114 (City/State and Zip Code)
For further information concerning this matter, please call:
Bryon John at (239) 293-4767  (Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$30.00 Filing Fee \$ \$55.00 Filing Fee \$ \$60.00 Filing Fee, Certificate of Status & Certificate of Status & Certified Copy (additional copy is enclosed)
MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314  STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## AMENDED/RESTATED ARTICLES WITH NAME CHANGE FOR ORLANDOPARTYLINE.COM LLC

Article I - New Name

Stevens Electric of Naples, LLC

Article II - New Address

**Principle Office Address** 

18535 Royal Hammock Blvd Naples, FL 34114

Mailing Address

18535 Royal Hammock Blvd Naples, FL 34114

Article III - Registered agent, Registered office and Registered Agent's Signature The name and Florida Street address of the new registered agent are:

Name: Steven Arnold John

Address: 18535 Royal Hammock Blvd

Naples, FL 34114

Having been named as registered agent and accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating 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 608, F.S.

Registered agent signature - Steven Arnold John

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## Article IV - Manager(s) or Managing Members(s):

Title: Name and Address:

President Steven Arnold John - 18535 Royal Hammock Blvd Naples, FL 34114

Vice President Bryan Gustav John - 604 Georgetown Dr. #D Casselberry, FL 32707

Secretary Linda Kay John - 18535 Royal Hammock Blvd Naples, FL 34114

Treasurer Christina Ranae John - 20 B Bobolink CT. Naples, FL 34105

Required Signature(s):

Signature of a member of authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Steven Arnold John

Signature of a member or authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Bryan Gustav John

Signature of a member or authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Linda Kay John

Signature of a member or authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Christina Ranae John

SEGRETARY OF STATE BIVISION OF CORPORATIONS