## h22000134391

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## **COVER LETTER**

Registration Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

TO:

JDK LOV SUBJECT:	V VOLTAGE LLC		
SUBJECT:	Name of Lim	ited Liability Company	<del></del>
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	JOSE M ECUELA		
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Name of Person	
		Firm/Company	
	383 DE SOTO DR		
		Address	
	MIAMI SPRINGS, FL 331	66	
		City/State and Zip Code	
	JESCUELA@KJDLOWV.		
	E-mail address: (	to be used for future annual report notific	cation)
For further information c	oncerning this matter, please ca	all:	
JOSE M ESCUELA		at ( 305 ) 776-2557	
Name o	f Person		Telephone Number
Enclosed is a check for the	ne following amount:		
☐ \$25.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addres		Street Address: Registration Sect	tion
Division of C		Division of Corp	

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

FILED

JDK I.	OW VOLTAGE LLC	2022 MAY 16 AM 9: 26
(Name of the Limited Liability	Company as it now appears on our	records.) SECRETACY OF
(A Fionda i	Sinuted Diabutty Company)	TALLAHASSEF, FI
The Articles of Organization for this Limited Liability Co	ompany were filed on 03/17/2022	and assigned
·lorida document number 1.22000134391		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ed liability company here:	
KJD LOW VOLTAGE LLC		
The new name must be distinguishable and contain the words "Limit	ed Liability Company," the designation	n "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
•	FSS)	
Trincipal Office dual cas in OST DE 71 OF REEL 7100 R.		
	·	
Enter new mailing address, if applicable:	<u> </u>	
amendment is submitted to amend the following:  f amending name, enter the new name of the limited liability company here:  LOW VOLTAGE LLC  ew name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."  r new principal offices address, if applicable:    cipal office address MUST BE A STREET ADDRESS     r new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
(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 registere
	office address on our records,	enter the name of the new registere
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	office address on our records,	enter the name of the new registers
3. If amending the registered agent and/or registered agent and/or the new registered office address here:	office address on our records,	enter the name of the new registere
3. If amending the registered agent and/or registered agent and/or the new registered office address here:  Name of New Registered Agent:		
B. If amending the registered agent and/or registered agent and/or the new registered office address here:  Name of New Registered Agent:		
B. If amending the registered agent and/or registered agent and/or the new registered office address here:  Name of New Registered Agent:	Enter Florida street	address
B. If amending the registered agent and/or registered agent and/or the new registered office address here:  Name of New Registered Agent:  New Registered Office Address:	Enter Florida street City	address
3. If amending the registered agent and/or registered agent and/or the new registered office address here:  Name of New Registered Agent:  New Registered Office Address:	Enter Florida street City	address

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
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			☐ Change
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ecord specifies a delayed	l effective date, b	ut not an effec	tive time, at 1	2:01 a.m. on	the earlier of	(b) The	90th	day aft	er the
is filed. ated MAY 10th			22						