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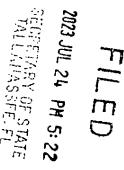
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COVER LETTER

TO: Registration Sec Division of Corp			•
Spot On Elec	etric LLC		
AUDJECT:	Name of Lin	nited Liability Company	
The enclosed Articles of A	amendment and fee(s) are sub	omitted for filing.	
Please return all correspon	dence concerning this matter	to the following:	
	Houston R Morris		
		Name of Person	
		Firm/Company	
	885 Tallevast Rd. unit B		
		Address	
	Sarasota - FL 34243		
	houston@hblabels.com	City/State and Zip Code	
		to be used for future annual repo	rt notification)
For further information cor	ncerning this matter, please co	all:	
Houston Morris		704 309-05	69
Name of I	Person	Area Code D	aytime Telephone Number
Enclosed is a check for the	following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy tadditional copy is enclosed	S60.00 Filing Fee, Certificate of Status & Certified Copy fadditional copy is enclosed)
Mailing Address:		Street Addre	<u>85:</u>

Registration Section
Division of Corporations
P.O. Box 6327

Tallahassee, FL 32314

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

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." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: 885 Tallevast Rd, unit B Sarasota FL 34243 Enter new mailing address, if applicable:	Spot On Electric, LLC		
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". The new principal offices address, if applicable: (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 registered office address on our records, enter the name of the new registered agent and/or registered office address on our records, enter the name of the new registered agent.	(<u>Name</u> of the Limited Liability Comp (A Florida Limited	any as it now appears on our records.) Liability Company))
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." Enter new principal offices address, if applicable: (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.		y were filed on March 28th, 2023	and assigned
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C. Enter new principal offices address, if applicable: (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.	This amendment is submitted to amend the following:		
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(Mailing address MAY BE A POST OFFICE BOX) Sarasora FL 34243	(Principal office address MUST BE A STREET ADDRESS)	Sarasota FL 34243	
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(Mailing address MAY BE A POST OFFICE BOX) TO THE STATE OF THE STATE	Enter new mailing address, if applicable:	885 Tallevast Rd, unit B	
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B. If amending the registered agent and/or registered office address on our records, enter the name of the new rej			
		address on our records, <u>enter th</u>	` _ _ \
Name of New Registered Agent:	Name of New Registered Agent:		
New Registered Office Address: Enter Florida street address	New Registered Office Address:	Enter Florida street address	
, Florida			

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

Title	<u>Name</u>	Address	Type of Action
AMBR	JIT TRADING (ASIA) LIMITED	ROOM 706A, HARBOUR CRYSTAL CENTRE, N	IC □Add
		GRANVILLE ROAD. KOWLOON, HK 99907-7 HR	ζ ≣Remove
			□Change
AMBR	Houston Ray Morris	305 Ringling Point Drive	≣ Add
		Sarasota, Fl. 34234	□Remove
			□Change
			□Add
			□Remove
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Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed document's effective date on the Department of State's records. e 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 filed.	_	
Effective date, if other than the date of filing:	_	
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Dated Suly 12 2023		
Demografier	ord is file	1.
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Signature of a member or authorized representative of a member	Dated _	1000
Signature of a member or authorized representative of a member	ک (Discorporation of the state of
	\propto	Signature of a member or authorized representative of a member
		Typed or printed name of signee

Filing Fee: \$25.00