1030000486/2

(Requestor's Name)	
(Address)	
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PICK-UP WAIT MAIL	
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(Document Number)	
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Special Instructions to Filing Officer:	
A. LUNT	
APR 17 2011	
EXAMINER	

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STOREMAN TO NITE OF

2012 APR 13 NH 100 K

COVER LETTER

TO:	Registration Sectorial Division of Carpe						
SUBJE	CT:	JOHN (3. PHILIE LLC				
		Name of Limi	ted Liability Company				
The end	closed Articles of A	mendment and fee(s) are sub	omitted for filing.				
Please 1	eturn all correspond	dence concerning this matter	to the following:				
			JANE M HARPER		_		
			Name of Person		T	၁	
JOHN G. PHILIE ELECTRIC LLC.						2817 APR 13	
Firm/Company					7.4		1
16640 BACHMANN AVE # 1 Address							Armana'
						EN BILLY	Sec. of
HUDSON , FL 34667					St. Pri		
City/State and Zip Code							
alicja@coolquest.com E-mail address: (to be used for future annual report notification)							
				ation)			
For furt	her information cor	ocerning this matter, please co	all:				
	JANE	M. HARPER	at (59-0500			
	Name of I	Person	Area Code & Daytime	Telephone Numbe	er		
Enclose	ed is a check for the	following amount:					
\$25 .	00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certifie	ate of Stat		sed)

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

JOHN G. PI				_	
(<u>Name of the Limited Liability Compa</u> (A Florida Limited L	ny as it now appea Liability Company)	irs on our records	<u>s.</u>)		
The Articles of Organization for this Limited Liability Company	were filed on	12/01/200	3 and	assigned	
Florida document numberL03000048612					
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limited liab	ility company he	<u>re</u> :			
ELECTRIC QU	JEST, LLC.		2812 3411		
The new name must be distinguishable and end with the words "Limi "L.L.C."	ted Liability Comp	any," the designat	ion LLC and	he abbreviation	
Enter new principal offices address, if applicable:	16640 BACH	MANN AVE #	#1 <u></u>		
(Principal office address MUST BE A STREET ADDRESS)	HUDSON, F	L 34667		The state of the s	
Enter new mailing address, if applicable:				**************************************	
(Mailing address MAY BE A POST OFFICE BOX)					
					
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here		our records, <u>en</u>	iter the nam	e of the new	
Name of New Registered Agent:					
New Registered Office Address:					
	Enter Florida street address				
	City		Zin C	ode	

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 608, 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 the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records: MGR = Manager , MGRM = Managing Member **Title** <u>Name</u> **Type of Action** <u>Address</u> .□ Add Remove \square \land dd Remove Remove Remove - \square Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Signature of a member or authorized representative of a member

Dated_

Typed or printed name of signed

Page 2 of 2

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Filing Fee: \$25.00