## L04000029894

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



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DIVISION OF CORPORATIONS

09 JUL 30 AN II: 32

T. HAMPTON

JUL 3 1 2009

EXAMINER

## **COVER LETTER**

| TO:  | Registration Section Division of Corporations  |  |  |  |  |  |
|--|--|--|--|--|--|--|
| SUBJE  | CT: JORGE L. ASPIRO L.L.C.  Name of Limited Liability Company  |  |  |  |  |  |
| The end  | closed Articles of Amendment and fee(s) are submitted for filing.  |  |  |  |  |  |
| Please r   | return all correspondence concerning this matter to the following:   |  |  |  |  |  |
|  | JORGE L, ASPIRO  Name of Person  |  |  |  |  |  |
|  | ASPIRO ELECTRIC Firm/Company   |  |  |  |  |  |
|  | 7852 CITRUS BLOSSOM DRIVE  |  |  |  |  |  |
|  | City/State and Zip Code  j - aspiro a Yahoo. com  E-mail address: (to be used for future annual report notification) |  |  |  |  |  |
|  | E-mail address: (to be used for future annual report notification)   |  |  |  |  |  |
| For further information concerning this matter, please call: |  |  |  |  |  |  |
|  | Joels L. Aspiro at (913) 361-9481  Name of Person Area Code & Daytime Telephone Number                               |  |  |  |  |  |
| Enclose  | ed is a check for the following amount:  |  |  |  |  |  |
| <b>□\$2</b> 5.   | 00 Filing Fee Certificate of Status    \$55.00 Filing Fee & Certificate of Status                                    |  |  |  |  |  |

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

| (Name of the Limited Liability Compan<br>(A Florida Limited L  | ny as it now appears on our records.)                             |  |  |
|--|---|--|--|
| The Articles of Organization for this Limited Liability Company Florida document number L0400029894.                     |   |  |  |
| This amendment is submitted to amend the following:  |   |  |  |
| A. If amending name, enter the new name of the limited liabi   | ility company here:   |  |  |
| ASPIRO ELECTR 1 The new name must be distinguishable and end with the words "Limit "L.L.C."                              | ted Liability Company," the designation "LLC" or the abbreviation |  |  |
| Enter new principal offices address, if applicable:  | 7852 CITRUS BLOSSOM DRIVE   |  |  |
| (Principal office address MUST BE A STREET ADDRESS)  | 1852 CITRUS BLOSSOM DRIVE<br>LANDO'LAKES FL. 34637                |  |  |
| Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)                                    | FILED STATESION OF CORPORATE AND AMIL:                            |  |  |
| B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here | fice address on our records, enter the name of the new            |  |  |
| Name of New Registered Agent:  |   |  |  |
| New Registered Office Address:   | •   |  |  |
| Enter Florida street address   |   |  |  |
|  | , Florida<br>City Zip Code  |  |  |
|  | City Zip Code   |  |  |

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 |   |   |  |  |  |
|------------------------|---|---|--|--|--|
| <u>Title</u>           | <u>Name</u>                             | Address   | Type of Action   |  |  |
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| D. sIf amend           | ling any other information, enter chang | ge(s) here: (Attach additional sheets, if necessary.) | _  |  |  |
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|                        | , | r or authorized representative of a member            |  |  |  |
|                        | Tokke L                                 | ASPIRO I or printed name of signee                    | <del></del>  |  |  |

Page 2 of 2

Filing Fee: \$25.00