

L05000050652

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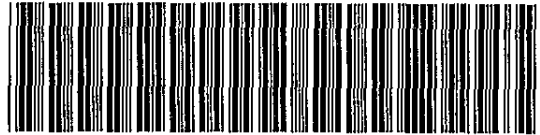
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Finesse Electrical Installation LLC
(Name of Limited Liability Company)

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Ochard L Davis

(Name of Person)

Finesse Electrical Installation LLC

(Firm/Company)

3017 Joyann St.

(Address)

Orlando FL 32810

(City/State and Zip Code)

For further information concerning this matter, please call:

Ochard L Davis

(Name of Person)

at (

407

) 342-5159
(Area Code & Daytime Telephone Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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
(additional copy is enclosed)

☐ \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

STREET ADDRESS:
Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Finesse

Electrical

Installation LLC

3017 Joyann St.

Orlando Fl.32810

This is to amend the Articles of Organization for Finesse Electrical Installation LLC.

The amendment is to remove SR from my name as Registered Agent and as manager.

The SR by my name is was a mistake. Thanks.

Ochard L Davis

A handwritten signature in black ink, appearing to read "Ochard L Davis", written over a horizontal line.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

Finesse Electrical Installation LLC

(Present Name)
(A Florida Limited Liability Company)

FIRST: The Articles of Organization were filed on 05/20/2005 and assigned document number L05000050652.

SECOND: The following amendment(s) to the Articles of Organization was/were adopted by the limited liability company:

Name of Registered Agent: Davis, Ocharl L

Name of Manager/Member Detail: Davis, Ocharl L

Dated 06-12-05, _____.



Signature of a member or authorized representative of a member

OCHARL L. DAVIS

Typed or printed name of signee

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Filing Fee: \$25.00