

06000064665

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

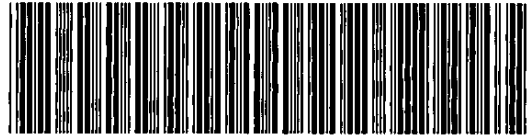
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300077966723

07/27/06--01044--002 **60.00

FILED

06 AUG -4 AM 9:34

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

06-64665
AR



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 31, 2006

JOHN SAFAR
6811 PHILLIPS INDUSTRIAL BLVD.
JACKSONVILLE, FL 32256

SUBJECT: FLORIDA EMERGENCY POWER, LLC
Ref. Number: L06000064665

We have received your document for FLORIDA EMERGENCY POWER, LLC and your check(s) totaling \$60.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of the entity cannot include "LLLP." This word/abbreviation is readily associated with or is commonly used to denote another type of entity. Please amend your document throughout accordingly.

The name of a Limited Liability Company must end with the words "Limited Company" or Limited Liability Company or with one of the following abbreviations Ltd. Co., LC, "L.C.," LLC, or L.L.C.

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

The document must contain written acceptance by the registered agent, (i.e. "I hereby am familiar with and accept the duties and responsibilities as registered agent for said corporation/limited liability company"); and the registered agent's signature.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6020.

Tammi Cline
Document Specialist

Letter Number: 306A00047982

FILED
06 AUG -4 AM 9:34
TALLAHASSEE
FLORIDA
STATE

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: FLORIDA EMERGENCY POWER
(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:

JOHN SAFAR
(Name of Person)

(Firm/Company)

6811 PHILLIPS INDUSTRIAL BLVD.
(Address)

JACKSONVILLE, FL. 32256
(City/State and Zip Code)

For further information concerning this matter, please call:

JOHN SAFAR at 904 504 5628
(Name of Person) (Area Code & Daytime 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
(additional copy is enclosed)

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

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

FILED
06 AUG -4 AM 9:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DRIRITE®

Facsimile

Date: August 4, 2006

To: Tammi Cline

From: John Safar

Fax Number: 850-245-6030

Number of pages including cover: 3

Re: Just to recap our conversation

Principal place of business is: 110 Cumberland Park Unit 107, St. Augustine, FL 32095

Mailing address is same as principal address

Name of registered agent is fine except my last name is Safar not Safer

Signature of registered agent should be: John Safar

Email: john@safar.com

Signature of a member: John Safar

MGRM: Delete John Safer, should be entity name: Safar Enterprises, LLLP

If you should have any questions please feel free to call me at 904-504-5628

FILED
06 AUG -4 AM 9:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

FLORIDA EMERGENCY POWER

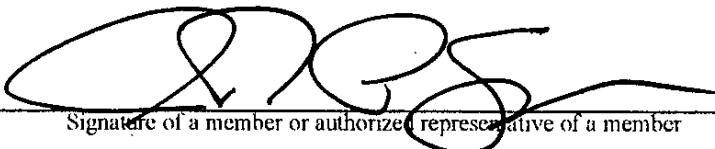
(Present Name)
(A Florida Limited Liability Company)

FIRST: The Articles of Organization were filed on JUNE 27, 2006 and assigned document number 606000064665

SECOND: This amendment is submitted to amend the following:

- * PRINCIPAL PLACE OF BUSINESS: 110 CUMBERLAND PARK,
UNIT 107, ST. AUGUSTINE, FL. 32095.
- * MAILING ADDRESS IS SAME AS PRINCIPAL ADDRESS
- * SIGNATURE OF REGISTERED AGENT SHOULD BE: JOHN SAFAR
- * CORRESPONDENCE NAME & EMAIL: JOHN SAFAR, JOHN@DRIRITE.NET
- * SIGNATURE OF A MEMBER: JOHN SAFAR
- * MGRM: DELETE SAFAR, JOHN - NAME
SHOULD BE ENTITY NAME: SAFAR ENTERPRISES, LLLP.

Dated JULY 19 2006


Signature of a member or authorized representative of a member

JOHN P. SAFAR
Typed or printed name of signee

Filing Fee: \$25.00

FILED
06 AUG -4 AM 9:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA