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T. HAMPTON

JUN 2 9 2010

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations					
SUBJECT:	BJECT: Electrical Services Plus, LLC				
		ited Liability Company			
The enclosed Articles	of Amendment and fee(s) are su	bmitted for filing.			
Please return all corres	spondence concerning this matte	r to the following:			
		Justin Henderson Name of Person			
Name of Person					
	Electrical Services Plus, LLC				
	Firm/Company				
		4106 Arnold Avenue			
	Address				
	Naples, FL 34104				
	City/State and Zip Code				
	Admin@bayelectricofcolliercounty.co E-mail address: (to be used for future annual report notification)				
For further information	n concerning this matter, please	•	icanon		
Ju	stin Henderson	at (239)	643-4144		
Name	e of Person	Area Code & Daytim	e Telephone Number		
Enclosed is a check for	r 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)		
Regi Divi P.O.	ILING ADDRESS: stration Section sion of Corporations Box 6327 shassee, FL 32314	STREET/COURI Registration Section Division of Corpor Clifton Building 2661 Executive Co Tallahassee, FL 32	on rations enter Circle		

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Electrical Servi		
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records Liability Company))
The Articles of Organization for this Limited Liability Company	were filed on 16 November	2006 and assigned
Florida document numberL06000110946		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	oility company here:	
The new name must be distinguishable and end with the words "Lim"L.L.C."	ited Liability Company," the designati	on "LLC" or the abbreviation
Enter new principal offices address, if applicable:	4106 Amold Avenue	
(Principal office address MUST BE A STREET ADDRESS)	Naples, FL 34104	SE SE
		L CR
Enter new mailing address, if applicable:	4106 Arnold Avenue	TARY COF COF
(Mailing address MAY BE A POST OFFICE BOX)	Naples, FL 34104	P P S
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		ter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida stree	t aadress
<u></u>	, Florid	a 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 **Title** <u>Name</u> <u>Address</u> **Type of Action** Anderson Electric, Inc. MGRM 4106 Arnold Avenue **✓** Add Remove Naples Fl 34104 ☐ Add ☐ Remove ☐ Add ☐ Remove ☐ Add Remove □Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated June 21 2010 ludu Signature of a member or authorized representative of a member Justin Henderson, Secretary/Treasurer Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00