LD9000002166

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name) LUG-2146
(Document Number)
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06/09/10--01017--001 **25.00





May 17, 2010

FRANKLIN FREEDMAN 3866 PROSPECT AVENUE, #15 RIVIERA BEACH, FL 33404

SUBJECT: SILENT STANDBY POWER SUPPLY LLC

Ref. Number: L09000002166

We have received your document for SILENT STANDBY POWER SUPPLY LLC. However, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$25.00. Your document will be retained in our pending file. Please return a copy of this letter to ensure that your check is properly credited.

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) 245-6067.

Letter Number: 010A00012355

Neysa Culligan Regulatory Specialist II

www.sunbiz.org

COVER LETTER

Division of					
SUBJECT:	Silent Standby	y Power Supply LLC			
		ed Liability Company			
The enclosed Articles	of Amendment and fee(s) are sub	mitted for filing.			
Please return all corre	espondence concerning this matter	to the following:			
		Franklin Freedman			
		Name of Person			
	Silent Standby Power Supply LLC				
		Firm/Company			
	3866 Prospect Ave, #15,				
	Address				
	Riviera Beach, FL 33404				
	City/State and Zip Code				
•	theoffice@indoorgenerator.com E-mail address: (to be used for future annual report notification)				
For further information	on concerning this matter, please co	<u>-</u>	ancadon)		
Franklin Freedman		at (561)	8425006		
Nan	ne of Person	Area Code & Dayt	ime Telephone Number		
Enclosed is a check for	or 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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

		1:0 JUJ	4-9 AM 9:50
Silent Stand (Name of the Limited Liability	by Power Supply I	LC	- 00 A
(A Florida	Limited Liability Company)	AH	ANT OF STATES
The Articles of Organization for this Limited Liability C	Company were filed on		and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the lim	ited liability company he	<u>re</u> :	
The new name must be distinguishable and end with the wo "L.L.C."	rds "Limited Liability Comp	any," the designation "L	LC" or the abbreviation
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADD)	RESS)	. ,	
Enter new mailing address, if applicable:	*******************		
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered agent and/or the new registered office add		our records, <u>enter t</u> l	ne name of the new
Name of New Registered Agent:			
New Registered Office Address:	Ен	nter Florida street addi	ress
		, Florida	
	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 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 Type of Action <u>Title</u> <u>Name</u> Address **MGRM** Siri Salmi 3866 Prospect Ave, #15 ✓ Add Riviera Beach, FL 33404 Remove ☐ Add ☐ Remove Remove Remove ∏Add ___Remove \prod Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) May 12, 2010 Signature of member or authorized representative of a member Franklin Freedman Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00