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EXAMINER



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COVER LETTER

TO:	Registration Section
	Division of Corporations

SUBJECT:		gue Electric LLC			
	Name of Limite	ed Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub-	nitted for filing.			
Please return all correspondent	ondence concerning this matter t	to the following:			
		Bryan Grassing			
		Name of Person			
	Majo	or League Electric LL	С		
		Firm Company			
	628 Pensacola Lane				
	Address				
	L	ake Mary, FL 32746			
		City/State and Zip Code			
	bgra	ssing@ml-electric.com	m		
		·	nt nonneation)		
For further information	concerning this matter, please ca	aii;			
Br	yan Grassing	at (407)	687-6664		
Name of Person		Area Code &	687-6664 Daytime Telephone Number		
Enclosed is a check for t	the following amount:				
S25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy radditional copy is en	nclosed) Certified	e 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

	Major League	e Electric LLC	<u></u>		
(<u>Name c</u>	f the Limited Liability Comp (A Florida Limited	any as it now appea Liability Company)	ars on our records.)		
The Articles of Organization for th	nis Limited Liability Compan	y were filed on	June 06, 2009	and assigned	
Florida document number	27-0363193				
This amendment is submitted to a	mend the following:				
A. If amending name, enter the	new name of the limited lia	bility company he	ere:		
The new name must be distinguishat "L.L.C."	ole and end with the words "Lir	nited Liability Comp	pany," the designation "Ll	_C'' or the abbrevia	_ ttion
Enter new principal offices addr	ess, if applicable:		33.7		_
(Principal office address MUST)	BE A STREET ADDRESS)			므	
				60 SIA	E SE
				R 9	£
Enter new mailing address, if an	plicable:			0.5	Ä-
(Mailing address MAY BE A PO.	ST OFFICE BOX)			- C	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
	<u> </u>	-		35 (2)	;;;;
					<u> </u>
B. If amending the registered			our records, enter th	e name of the	Ξ <u>.</u> new
registered agent and/or the new	registered office address he	ere:			
Name of New Registered	l Agent:				
New Registered Office A	ddress:				
		Ε	inter Florida street addr	ess	
			Florida		
		Cin:		Zin Coda	

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

d If amendin or Managir	g the Managers or Managing Mem ng Member being added or removed	bers on our records, enter the title, name, and a	address of each Manager
MGR = Ma	•		
<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	Kathieen A Leary	3029 Waterman Street Deltona, Fi. 32738	Add Remove
MGR	Erin J Grassing	628 Pensacola Lane Lake Mary, FL 32746	
			Add Remove
			Add Remove
	, ,	hange(s) here: (Attach additional sheets, if necess	arş.)
= (<u>(</u>	Doel Gossman (M Siyan Grassing (M	16RM) - 5070 16R) - 5070	
Dated	December 07	2009	
		Bryan Grassing yped or printed name of signee	

Page 2 of 2

Filing Fee: S25.00