# L1000004040

(Requ	estor's Name)	
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(City/S	State/Zip/Phone	÷#)
PICK-UP	WAIT	MAIL
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(Docu	ment Number)	
Certified Copies	Certificates	of Status
Special Instructions to Fili	ng Officer.	

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SECKETARY OF STATE

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### **COVER LETTER**

TO: Registration Section
Division of Corporations

# URIFICATE Lou's Electric & Lighting Designs 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:

Luciano	DeGennaro
	Name of Person

Lou's Electric

Firm/Company

866 105th Ave

Address

Naples, Fl. 34108

City/State and Zip Code

louselectric@yahoo.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

# Luciano DeGennaro

239 200-1466

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Lou's Electric & Lighting Designs LLC		
(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 Florida document number L1000040410	were filed on 04/15/2010	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility compony here:	
· · · · · · · · · · · · · · · · · · ·	mity company nere.	
Lou's Electric LLC	N	. 11 '.' 63 [ () 2
The new name must be distinguishable and end with the words "Limited Liab	oility Company," the designation "LLC" of	r the appreviation "L.L.C."
Enter new principal offices address, if applicable:	866 105th Ave	
(Principal office address MUST BE A STREET ADDRESS)	TBE A STREET ADDRESS) Naples, Fl. 34108	
		1
Enter new mailing address, if applicable:	866 105th Ave	
(Mailing address MAY BE A POST OFFICE BOX)	Naples, Fl. 34108	(A) - (The control of the control of
		7 C 32 1)
B. If amending the registered agent and/or registered o		nter the name of the new
registered agent and/or the new registered office address her	<u>e</u> :	Name of the state
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	. Floric	ła
	City	Zip Code
No. Decision of Amends Cirmature is homeing Decisioned Amends		

### 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 605, 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

FEI/EIN 46-57208	on, enter change(s) here: (Attach additional she	eis, if necessary.
1 LI/LIN 40-37 200	, , , , , , , , , , , , , , , , , , ,	
Effective data if other than the de	-As of films.	(A:1)
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the date this document is filed by the Florid	be prior to date of receipt or filed date and cannot be more the da Department of State)	(optional) han 90 days after
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the date this document is filed by the Florid	da Department of State)	<b>(optional)</b> han 90 days after
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Filing Fee: \$25.00