

L10000074236

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

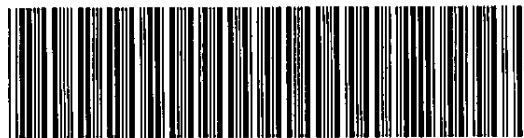
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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05/01/14--01920--020 **30.00

RECEIVED
DEPARTMENT OF STATE
DIVISION OF CORPORATION
2014 MAY -1 PM 1:15
FILED
TO ACKNOWLEDGE
SUFFICIENCY OF FILING

M. MILLIGAN
EXAMINER

MAY -1 2014

FILED
14 MAY -1 PM 1:27
DEPT. OF STATE
FILING DIVISION

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Symon Systems, 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:

Ryan W. Lawson

Name of Person

Symon Systems, LLC

Firm/Company

5021 Metzke Lane

Address

Tallahassee, FL. 32303

City/State and Zip Code

ryan@llelectrical.com

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

For further information concerning this matter, please call:

Ryan W. Lawson

Name of Person

at (850) 562-4111

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**

Symon Systems, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

FILED
14 MAY -1 PM 1:27
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 4/14/2014 and assigned
Florida document number L10000074236.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Symon Systems, LLC

5021 Metzke Lane

Tallahassee, FL. 32303

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

Symon Systems, LLC

5021 Metzke Lane

Tallahassee, FL. 32303

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

Ryan W. Lawson

New Registered Office Address:

5021 Metzke Lane

Enter Florida street address

Tallahassee

City

Florida 32303

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 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.

[Signature]
If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

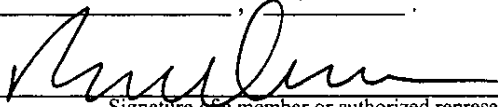
<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
<u>MGR</u>	<u>Lawson & Lawson Electrical Services, Inc</u>	<u>5019 Metzke Lane</u>	☐ Add
		<u>Tallahassee, FL. 32303</u>	☒ Remove
<u>MGR</u>	<u>Ormand Z. Lawson Jr.</u>	<u>5021 Metzke Lane</u>	☒ Add
		<u>Tallahassee, FL. 32303</u>	☐ Remove
<u>MGR</u>	<u>Ormand Z. Lawson III</u>	<u>5021 Metzke Lane</u>	☒ Add
		<u>Tallahassee, FL. 32303</u>	☐ Remove
<u>MGR</u>	<u>Ryan W. Lawson</u>	<u>5021 Metzke Lane</u>	☒ Add
		<u>Tallahassee, FL. 32303</u>	☐ Remove
<u> </u>	<u> </u>	<u> </u>	☐ Add
		<u> </u>	☐ Remove
<u> </u>	<u> </u>	<u> </u>	☐ Add
		<u> </u>	☐ Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

E. Effective date, if other than the date of filing: _____ (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated April 30, 2014



Signature of a member or authorized representative of a member

Ryan W. Lawson

Typed or printed name of signee