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(Document Number)		
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B. BOSTICK SEP **1 7** 2012

EXAMINER

COVER LETTER

TO: Registration S Division of Co			
		MHD LLC	
SUBJECT:		ited Liability Company	_
	Amendment and fee(s) are sul		
		Michelle Lewis	<u> </u>
		Name of Person	
		KMHD LLC	_
		Firm/Company	
		1628 SW 44th Ter	
		Address	
		Cape Coral, FL 33914	
		City/State and Zip Code	75
	E-mail address: (nelle@allpowerelec.com to be used for future annual report notification)	- 🚊 🛱 🤼
For further information	concerning this matter, please	call:	S. F.
М	ichelle Lewis	at (239) 634-9731	12 SEP 14 PH 12: 03
	of Person	Area Code & Daytime Telephone Nurr	12 SEP 14 PH 12: 03
Enclosed is a check for	the following amount:		**
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	Certified Copy Certif (additional copy is enclosed) Certif	Filing Fee, ficate of Status & fied Copy tional copy is enclosed)
Regisi Divisi P.O. E	LING ADDRESS: tration Section on of Corporations Box 6327 tassee, FL 32314	STREET/COURIER ADDRESS Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	i:

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	HD, LLC		
(<u>Name of the Limited Liability Co</u> (A Florida Limi	ompany as it now appears ited Liability Company)	on our records.)	
The Articles of Organization for this Limited Liability Com	pany were filed on	9-22-10	and assigned
Florida document number <u>L10000098968</u> .			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited	l liability company here		
All Pow	er Elec, LLC		
The new name must be distinguishable and end with the words "L.L.C."	"Limited Liability Compan	y," the designation "	LLC" or the abbreviation
Enter new principal offices address, if applicable:			+
(Principal office address MUST BE A STREET ADDRES	<u></u>	5	- 72
			SED + 1
		;	
Enter new mailing address, if applicable:			3 1
(Mailing address MAY BE A POST OFFICE BOX)			77. 77
			<u> </u>
B. If amending the registered agent and/or registered registered agent and/or the new registered office address		ır records, <u>enter</u>	the name of the new
			
Name of New Registered Agent:			
New Registered Office Address:			
	Ente	er Florida street ad	dress
		, 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 Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

<u> Fitle</u>	<u>Name</u>	<u>Address</u>	Type of Action
			Add
<u> </u>			□ Pamova
			Kemove
			Add
			Pamaua
			Add
			Remove
			5
			Add Remove
			Add
			Remove
D. If ame	nding any other information,	, enter change(s) here: (Attach additional she	ets, if necessary.)
		enter change(s) here: (Attach additional she	Ž 72
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Dated	9-12	<u>, 2012</u> .	
	Misko		
	Slamatur	re of a member or authorized representative of a m	ambar)
	Signatur	te of a member of authorized representative of a m	cinoci -

Page 2 of 2

Filing Fee: \$25.00