

L11000104261

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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O SIMMONS
SEP 05 2018

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Chris Electric Services, 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:

Edward C. Aikens
Name of Person

Firm/Company

4516 Porpoise Dr.
Address

Tampa, Fla 33617
City/State and Zip Code

ECA_vfg@yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Edward C. Aikens at (813) 786-3617
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

Chris Electric Services, LLC

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

The Articles of Organization for this Limited Liability Company were filed on 09/12/2011 and assigned Florida document number L11000104261.

This amendment is submitted to amend the following:

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

Chris + Watson Electric Services, LLC

The new name must be distinguishable and contain 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)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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:

New Registered Office Address:

Enter Florida street address

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 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

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person 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>VP</u>	<u>FITZROY Christopher</u>	<u>12919 Prestwick Dr.</u>	<input type="checkbox"/> Add
		<u>River view, Fla 33579</u>	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
<u>VP</u>	<u>Jeffrey Lee Watson</u>	<u>3616 CORONET PIT Rd</u>	<input checked="" type="checkbox"/> Add
		<u>Plant City, Fla 33566</u>	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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

Article II Principal Officers Address
Mailing Address

Article V Address of Managing Members

President Edward C. Aikens
4516 Porpoise Dr Tampa, Fla 33617

VP Fitzroy Christopher Jr
12919 Prestwick Dr Riverview, Fla 33578

VP Jeffrey Lee Watson
3616 Coronet Pt Rd Plant City, FL 33566

E. Effective date, if other than the date of filing: _____ (optional).
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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AUG 31 AM 09:07
18
TAMPA, FLORIDA

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:
(b) The 90th day after the record is filed.

Dated 28 August 2018

Edward C. Aikens
Signature of a member or authorized representative of a member

Edward C. Aikens
Typed or printed name of signer



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 15, 2018

EDWARD C AIKENS
4516 PORPISE DR
TAMPA, FL 33617 US

SUBJECT: CHRIS ELECTRIC SERVICES, LLC
Ref. Number: L11000104261

We have received your document for CHRIS ELECTRIC SERVICES, 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 the corrected original and one copy of 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) 245-6051.

Janeice L Smith
Regulatory Specialist II
Registration Section

Letter Number: 318A00016873