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T. CLINE
OCT 30 2012
EXAMINER

## **COVER LETTER**

TO: Registration Section
Division of Corporations

SUBJECT: ELECTRIC EXPERTS, LLC

The enclosed Articles of Amendment and feets) are submitted for filling.

Please return all correspondence concerning this matter to the following:

JOHN R MANKIEWICZ

Name of Person

FLECTRIC EXPERTS, LLC

Fitto Company

22950 SW 65th AVER

Address

Bocalaton, FL 33428

Cry. State and Lip Code

Mankiewicz. John algebra notification)

For further information concerning this matter, please cult-

TOHN R MANKIEWICZ at (561) 654-9422

Name of Person Area Code & Disyland Felephone Number

Enclosed is a check for the following amount:

🖎 🛢 \$25.00 Filing Fee

Certificate of Status

\$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

Certificate of Status & Certificate Copy (additional copy is enclused)

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MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURTER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ELECTRIC EXPERIS, 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 Lial	bility Company v	vere filed on <u>08-21-</u>	12 and assigned		
Florida document number <u>L/2000/0</u>	7677				
This amendment is submitted to amend the follow	ving:				
A. If amending name, enter the new name of the limited liability company here:					
NO CHANGE -					
The new name must be distinguishable and end with "L.L.C."	the words "Limite	d Liability Company," the designat	tion "LLC" or the abbreviation		
Enter new principal offices address, if applical	ole:	22950 SW 65+	AVE		
(Principal office address MUST BE A STREET					
		Boca RATON, FL	7347. <del>X</del>		
		Dec KANGO, 1 E	33/20 50		
		7700 0160	th out		
Enter new mailing address, if applicable:		Z 2930 SW 63	THE STATE OF THE S		
(Mailing address MAY BE A POST OFFICE B	<u>0X)</u>				
		BOCA RATON, FL	<u> 33428</u>		
		•			
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   MANKIEWICZ   TOHK R					
registered agent and/or the new registered offi	<u>ce address here</u> :		<u> </u>		
			P ( )		
Name of New Registered Agent.	_MANK	IEWICZ, JOHN	VK		
New Registered Office Address:	22950	SW 65th AVE	<u>-</u>		
<del></del>		Enter Florida stre	et address		
	Boon R	7-to~, Florid	da 33428		
		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 familia, with mal 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.

Page 1 of 2

If Changing Registered Agent, Signature of New Registered Agent

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

MGR = Manager

MGRM = Managing Member

<u> Title</u>	<u>Name</u>	Address	Type of Action
MGR	JOHN R Mankiewicz	22950 SW 65 <sup>th</sup> AVE Bocallaton FL, 33428	Add Remove Add Remove Add Add Add Add Add Add Add
			Remove  Add Remove  Remove
D. If ame	ending any other information, enter change(	s) here: (Attach additional sheets, if necessary.)	29 M 12: 36
- 	8-27-12,  John Make  Tothe Mark  Typed of	or authorized representative of a member  FWICZ  r printed name of signee	

Page 2 of 2

Filing Fee: \$25.00