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COVER LETTER

TO: Registration Section Division of Corporations						
SUBJECT: LOU'S B.E.S.T. ELECTRICAL CONTRACTING LLC Name of Limited Liability Company						
Dear Sir or Madam:						
The enclosed Registered Agent/Registered Office	Change and fee(s) are submitted for filing.					
Please return all correspondence concerning this r	natter to the following:					
LOUIS A MILLER Name of Person						
LOU'S B.E.S.T. ELECTRICAL CONTRACTI Firm/Company	NG LLC					
, ,						
1064 RAINTREE LANE Address						
Address						
WELLINGTON, FL 33414						
City/State and Zip Code						
lousbestelectric@gmail.com						
E-mail address: (to be used for future annual report notification)						
For further information concerning this matter, please call:						
LOUIS A MILLER at (954) 258-4047					
Name of Person	Area Code & Daytime Telephone Number					
STREET/COURIER ADDRESS:	MAILING ADDRESS:					
Registration Section	Registration Section					
Division of Corporations	Division of Corporations					
Clifton Building	P.O. Box 6327					
2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Florida 32314					
Enclosed is a check for the following amount:						
\$25 Filing Fee	\$55 Filing Fee & Certified Copy					

' STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

l. Na	me of the limited liability company: LOU'S B E.S.T. ELECTR	ICAL CONTRACTING LLC			
	Principal office address of limited liability company	1064 RAINTREE LANE	ALL!	2013 N	
	(Note: MUST BE STREET ADDRESS)	WELLINGTON, FL 33414	Zini Zin	<u> </u>	-
		WELLINGTON, FE 33414	- SS		
(b)	Mailing address of limited liability company:	1064 RAINTREE LANE	m III.	α	m
(Note: MAY BE POST OFFICE BOX)			-T)	7	O
	,	WELLINGTON, FL 33414	0	_ <u></u>	
11/28/20	112	L120000151013	AGE 311	59	
3. Da	te of filing/registration in Florida	1. Document number			
5. (a)	Registered Agent and Registered Office shown on the Registered Agent:	ne records of the Florida Dept	of Sta	ite:	
	Registered Office Address:	3030 N. ROCKY POINT DRIVE SUITE 150A	POINT DRIVE SUITE 150A		
		TAMPA, FL 33607			
	NEW Registered Agent: NEW Registered Office Address:	LOUIS A MILLER 1064 RAINTREE LANE			
	(MUST BE FLORIDA STREET ADDRESS)	WELLINGTON FL 33414			
confir and the liabilithe me the op Signatu	limited liability company is not organized under the larmed that after the change or changes are made, the Flore business office of the registered agent will be identify company, it is hereby confirmed that the change(s) embers of the limited liability company or as otherwise the provision of the limited liability company. The office of a member or authorized representative of a member of the limited liability company. The or typed name of signce the provisions of all statutes relative to the provision of all statutes relative to the provision of the limited liability company is the reby confirm that the limited liability company	orida street address of the regical. Or, in the case of a Florid was/were authorized by an after provided in the articles of of the provided in this capacity. It per and complete performance in the registered agent as prely reflect a change in the registered in writing of the person of the registered in writing of the registered agent as provided in the articles of the provided in	istered da limit firmativ rganiza	office ed ve vo tion	te of
Signati	ire of Registered Agent Louis	A Miller			

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00