# L13000020591

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PICK-UP	WAIT	· MAIL
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Certified Copies	_ Certificates of	of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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## **COVER LETTER**

TO:

Registration Section
Division of Corporations

SUBJECT:

LED EXPERTS,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:

# DANIELLE K GOROSTIAGA

Name of Person

Firm/Company

**181 GRASSY ROAD** 

Address

KEY LARGO, FL 33037

City/State and Zip Code

**DKID@BELLSOUTH.NET** 

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

For further information concerning this matter, please call:

# DANIELLE GOROSTIAGA

<sub>4/</sub>305<sub>\</sub>274-9004

Name of Person

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

LED EXPERTS, LLC	
(Name of the I	Limited Liability Company as it now appears on our records (A Florida Limited Liability Company)
	(A Florida Limited Liability Company)
	0101040

The Articles of Organization for this Limited Liability C	ompany were filed on 2/8/013	and assigned
Florida document number L13000020591	·	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ited liability company here:	
The new name must be distinguishable and end with the wor "L.L.C."	ds "Limited Liability Company," the design	nation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDR	(ESS)	113 F
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		SS
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		54 5 5
		5 <b>5 4</b>
B. If amending the registered agent and/or registered agent and/or the new registered office add		enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:	Faster Florida	too at a January
	Enter Florida street address	
	, Flo	orida Zip Code
	<i>,</i>	Lip 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 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:

or Managing Membe	er being added or removed from our records:	
MGR = Manager	• • • •	
MGRM = Managing	Member	

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	LAURA SCOTT	65 SE NORFOLK BLVD	Add
		STUART, FL 34997	Remove
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		LAHASSEE.	Add Add Remove
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D. If amending any other informatio	on, enter change(s) here: (Attach additional she	eets, if necessary.)
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Dated FEBRUARY 12	2013	
Danielle K	Horostiaga	
DANIELLE K GC	ture of a member or authorized representative of a m	ember
DANIELL IN OC	Typed or printed name of signee	
	Page 3 of 3	
	Filing Fee: \$25.00	2019 FEB 19 PH 2 54 SECULARASSEE FLORING