1 14000023608

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COVER LETTER

TO: Registration Sec Division of Corp			
SUBJECT: 2	EV Innovation Name of Limite	LIGHTS LLC ed Liability Company	
	Amendment and fee(s) are subm		
Please return all correspor	ndence concerning this matter to) the tonowing.	
		reanie of person	
	RV	Firm/Company	2
	50	57 Mulat Rd	
	Snaptu E-mail address: (1	City/State and Zip Code 1020 9 mail o be used for future afunual report notation	2583 . com
For further information co	oncerning this matter, please ca	ll:	
Name o	\mathcal{C}	at (<u>\$50</u>) <u>384</u> Area Code Daytime	- 4609 Telephone Number
Enclosed is a check for th	ne following amount:	/	
□ \$25.00 Filing Fee	☐ \$30,00 Filing Fee & Certificate of Status	☐ \$55.00 Filling Fee & Certified Copy (additional copy is enclosed)	☐ \$60,00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
		orne e walibi	:D AMMDECC

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 Fallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(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 $\frac{2}{11/2014}$ and assigned Florida document number $\frac{14000023608}{140000360036008}$
This amendment is submitted to amend the following:
A. If amending name, enter the new name of the limited liability company here:
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC,"
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
B. If amending the registered agent interest address here:
Name of New Registered Agent:
New Registered Office Address: Emer Florida street address
, Florida
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 = M $AMBR = A$	anager uthorized Member		
<u>Title</u>	Name	<u>Address</u>	Type of Action
			Add
			☐ Remove
			☐ Change
			□ Add
			□ Remove
			☐ Change
			Remove
			Change
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			Change
			Remove
			☐ Change
			Add
			Remove
			Change

	Decoment 10% Ownership
	Jenniser Mc Gaugh / Aith. Rep
(If an effective	ate, if other than the date of filing: 7-17-2015 (optional) 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 605.02 date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed effective date on the Department of State's records.
the record) The 90t	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier h day after the record is filed.
ر. Dated	7-17-2018
	Signature of a pember or authorized representative of a member

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Filing Fee: \$25.00