L14000034945

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COVER LETTER

	tration Section of Corp			
SUBJECT.	Advanced	l Building Services LLC	;	
SUBJECT: _		Name of Limit	led Liability Company	
The enclosed	Articles of A	imendment and fee(s) are subr	nitted for filing	
		dence concerning this matter t	_	
, , , , , , , , , , , , , , , , , , , ,	• • • • • • • • • • • • • • • • • •		g.	
		Tim Gustafson		
			Name of Person	
		Advanced Building S		
			Firm/Company	
		201 Woodview Way		
			Address	
		Bradenton FL 34212	·	
		advancedbuildingsen	City/State and Zip Code	
		·	o be used for future annual report notifi	cation)
For further in	formation co	incerning this matter, please ca	alt:	
Tim Gusta	ıfson		941 538 2759	
	Name of	Person	Area Code Daytime	Telephone Number
		e following amount:	Flore on Fillian Dag 9.	D \$40.00 Elling Egg
□ \$25.00 Fi	ing 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)
	Registra	NG ADDRESS: ation Section n of Corporations	STREET/COURING Registration Section Division of Corpora	ı

P.O. Box 6327

Tallahassee, FL 32314

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Advanced Building Services		
(Name of the Limited (A	Liability Company as it now appears on our records.) Florida Limited Liability Company)	
The Articles of Organization for this Limited Liab Florida document number <u>L14000034945</u>	ility Company were filed on March 03 2014	and assigned
This amendment is submitted to amend the follow	ing:	
A. If amending name, enter the new name of the	ne limited liability company here:	
Advanced Electrical & Building Services	LLC	型的 苗
The new name must be distinguishable and end with the wo	rds "Limited Liability Company," the designation "LLC" or t	he abbreviation-L.L.C."
Enter new principal offices address, if applicab	le:	至 7
(Principal office address MUST BE A STREET)	ADDRESS)	S22
Enter new mailing address, if applicable:		T: 54
(Mailing address MAY BE A POST OFFICE BO	<u></u>	
B. If amending the registered agent and/or registered agent and/or the new registered office	registered office address on our records, ent	er the name of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Florida	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 the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = M $AMBR = A$	anager uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			□ Add
			□ Remove
			Remove
		-	
			TURemove
			□ Add
			☐ Remove
			Add
			Remove
		•	

The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)
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(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)
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(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)
Dated 4-3-15
,
Tim Sultat
Signature of a member or authorized representative of a member
Tim Gustafson Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

