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(City/State/Zip/Phone #)
(Business Entity Name)
(Document Number)
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# Fernandez Electrical, LLC

November 7, 2017

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Re: Fernandez Electrical, LLC- Document number #L15000105865

Dear Division of Corporations:

I have completed the Articles of Amendment form to the best of my ability. This corporate entity would like to change its physical and mailing address; as well, as add a new member. Please contact me should you discover any errors in this action, or have any questions.

Best wishes,

Ramon Fernandez Owner Fernandez Electrical, LLC



		COVER LETTE	R	
TO: Registration Sec Division of Corp				
SUBJECT:	Fernanc III	lez Electrical, LLC		
	Name of L	imited Liability Company		
	Amendment and fee(s) are si	-		
Please return all correspon	ndence concerning this matter	er to the following:		
		Ramon E. Fernandez		
		Name of Person		
		Fernandez Electrical, LL0	C	
		Firm/Company		
		3525 Ohio Ave		
		Address		
		Sanford, FL 32773		
		City/State and Zip Code fernandezelectrical1@yaho	o.com	
	14 1	: (to be used for future annual		
For further information co	ncerning this matter, please	call:		
Bobby F	ernandez	407 at ()	218-0364	
Name of	Person	Area Code	Daytime Telephone Number	
				2 
Enclosed is a check for th	-			ð: 4 9
□ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is ene	Certificat losed) Certified	e of Status &
Registr Divisio P.O. Bo	NG ADDRESS: ation Section in of Corporations bx 6327 ssee, FL 32314	Registrati Division Clifton B 2661 Exe	<b>VCOURIER ADDRESS:</b> ion Section of Corporations uilding cutive Center Circle ce, FL 32301	

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

F <b>ER</b> NANDEZ ELECTRIC	CAL, LLC
(Name of the Limited Liability Company as	it now appears on our records.)
The Articles of Organization for this Limited Liability Company were	
florida document number L15000105865	
This amendment is submitted to amend the following:	
A. If amending name, <u>enter the new name of the limited liability</u>	company here:
The new name must be distinguishable and contain the words "Limited Liability Co	ompany," the designation "LLC" or the abbreviation "L.L.C.
Enter new principal offices address, if applicable:	3525 Ohio Ave
Principal office address MUST BE <u>A STREET ADDRESS)</u>	Sanford, FL 32773
	· ·
Enter new mailing address, if applicable:	3525 Ohio Ave
Mailing address MAY BE A POST OFFICE BOX	Sanford, FL 32773

B. If amending the registered agent and/or registered office address on our records, <u>enter the name of the new</u> registered agent and/or the new registered office address here:

Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Florida	
	City	Zip Code
Registered Agent's Signature, if changing Registered Agent:		6

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

Page 1 of 3

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 = Manager AMBR = Authorized Member

<u>Name</u>	Address	Type of Action
Bobby Fernandez	3525 Ohio Ave, Sanford, FL 32773	🖬 Add
		Remove
	· · · · · · · · · · · · · · · · · · ·	Change
	<u> </u>	Add
		Remove
		Change
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		Remove
		Change
		Add
		Remove
		Change
		🗖 Add
		Remove
		Change
	Page 2 of 3	
		Bobby Fernandez  3525 Ohio Ave. Sanford. FL 32773

### D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

We are changing the physical and mailing address; and adding a member.

ctive date, if other than the date of filing:	(optional)	9
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(If an effective 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 605.0207 (3)(b) <u>Note:</u> If the date inserted in this block does not need the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

#### If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated	November 7.		2017	
	Æ			
	Signature o	ân	nember or authorized representative of a member	
			Ramon E. Fernandez	
			Typed or printed name of signee	_
			Page 3 of 3	
			Filing Fee: \$25.00	
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