## L15 000 138 328

(Requestor's Name)	
(Address)	
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PICK-UP WAIT	MAIL
(Business Entity Name	<u> </u>
(Document Number)	
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## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: Amee	Arrived Electric, LLC Name of Limited Liability Company
,	Name of Limited Liability Company
The enclosed Articles of Amendment and	fee(s) are submitted for filing.
Please return all correspondence concerning	g this matter to the following:
	Alfredo Arrufat Name of Person
	Name of Person
	Firm/Company
	12478 SW 199 Terr
	Address
	Miami, FL 33177
	Miami, FL 33177  City/State and Zip Code
_ GRRJU	pail address: (to be used for future annual report notification)
E-	hail address: (to be used for future annual report notification)
For further information concerning this ma	tter, please call:
A. Ta. (12)	GCV PIE III
Name of Person	at (954) 868 4160 Area Code Daytime Telephone Number
Enclosed is a check for the following amou	
\$25.00 Filing Fee \$30.00 Filing Certificate	
eeeu	(additional copy is enclosed) Certified Copy
	(additional copy is enclosed)
Mailing Address:	Street Address:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
P.O. Box 6327	The Centre of Tallahassee
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

AMPE ARRIVE	D ELECTRIC 6	LLC	
(Name of the Limited Liability (A Florida L	Company as it now appears imited Liability Company)	on our records.)	<del></del>
The Articles of Organization for this Limited Liability Cor		08/06/2015	_ and assigned
Florida document number <u>L 15000 138 328</u>			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limite	d liability company her	<u>e</u> :	
The new name must be distinguishable and contain the words "Limited	d Liability Company," the des	ignation "LLC" or the abbre	viation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRE	<u>SS)</u>	· · · · · · · · · · · · · · · · · · ·	
Enter new mailing address, if applicable:			<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered o			17.0 T
B. It amending the registered agent and/or registered of agent and/or the new registered office address here:	inice address on our rec	oras, <u>enter the name (</u>	i Lae new registered
			m —
Name of New Registered Agent			
New Registered Office Address			
New Registered Office Address	Enter Florid	a street address	<del> </del>
		, Florida	
	City		Zip Code
New Registered Agent's Signature, if changing Registered A	<u>\gent:</u>		
I hereby accept the appointment as registered agent an provisions of all statutes relative to the proper and con accept the obligations of my position as registered agent being filed to merely reflect a change in the registered company has been notified in writing of this change.	nplete performance of m nt as provided for in Ch	ny duties, and I am fan Japter 605, F.S. Or, if	niliar with and this document is

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 = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>		Address	Type of Action
MBIR	ALFREDO E	ARRUFAT	12478 SW 199 TERR	□Add
			MIAMI FL 33177	Remove
				□Change
	<del></del>			🗀 Add
				□Remove
				Change
				□Add
				□Remove
				Change
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				Change
			<del></del>	□Add
				Remove
				□Change
				□Add
				□ Remove
				□Change

If ame	ending any other informatio	n, enter change(s) here: (Attach additional sheets, if necessary.)
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(If an eff	ective date is listed, the date must be	of filing:
he record ord is fil		but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated		- Mark
	Sig	Alfredo E. Averu PAT
		Typed or printed name of signee