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PICK-UP	☐ WAIT	MAIL
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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: SIMPLE ELECTRICAL SOLUTIONS 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:
Daniel Hamilton Name of Person
SIMPLE ELECTRICAL SOLUTIONS LLC.
4625 30TH AVE SE.
NAPIES FL. 34117
Daniel @ Simple electrical solutions. Com. E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Daniel Hamiltan Name of Person at (239) 213 - 8609 Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
□ \$25.00 Filing Fee □ \$30.00 Filing Fee & □ \$55.00 Filing Fee & Certificate of Status □ \$55.00 Filing Fee & Certificate of Status & Certificate of

MAILING ADDRESS:

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

STREET/COURIER ADDRESS:

Certified Copy (additional copy is enclosed)

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

(additional copy is enclosed)

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Cinnale ELECTRICAL

	Company as it now appears on our records.) imited Liability Company)
The Articles of Organization for this Limited Liability Cor	mpany were filed on September 19, 2016 and assigned
Florida document number <u>L 16000 [74][C</u>	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limite	ed liability company here:
The new name must be distinguishable and contain the words "Limite	d Liability Company," the designation "LLC" or the abbreviation "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:	
(Mailing address MAY BE A POST OFFICE BOX)	
	Co Co
	67)
B. If amending the registered agent and/or registeregistered agent and/or the new registered office addre	red office address on our records, <u>enter the name of the n</u> <u>ss here</u> :
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	, Florida
	City 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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:					
MGR = Ma AMBR = Au	nager thorized Member				
<u>Title</u>	Name	Address	Type of Action		
<u>CFO</u>	MICHELLE HAMILTON	4625 30TH AVE SE.	Add		
		NAPLES FL, 34117	Remove		
		(239) 455-2249	Change		
,			Add		
			Remove		
			Change		
			Add		
			Remove		
			Change		
			Remove		
			Change		
					
			□ Remove		
			Change		
			D Add		
			□ Remove		
			Change		

In forming LLC, I THOUGHT IT WOULD BE MY WIFE AS PARTNER, AFTER FURTHER RE	NICE TO	142-	
9 9 4 -		TIME	
MY WIFE AS PARTNER, AFTER FURTHER RI	ESEMOH 1	ND	<u></u>
INVESTIGATION, I, DANIE! Harrilton CAT WIFE EMPLOYED BY MY COMPANY DUE TO A DISMBILITY PERMANANTLY. I FAMLED TO DID ADD HER WOER MY UNN PUNER W/UN	U NOT HO	THE M	N
WIFE EMPLOYED BY MY COMPANY DUE TO A	AU INIFE I	3BING	T SON
DIGMINION DIRWANNITH E FAILED TO	ACFRX TO	hc B	
DID ADD HER INDER MY MAN DUNER IN LOW	IT HER POLIN	8 100	CUM
Characteristic Strain Tolly	2 DI ASSES	Cons	1.600 1.00
ONCE SHE, MY WIFE, MICHELLE HAMILTON E ABOUT WHAT I DID, SHE REQUESTED TO AM	X E MO	<u> PUKI</u>	91/
TRUT WHAT I DID, SHE REQUESTED TO MA	MEND MICH	(15	<u>a</u>
ORGANIZATION AND REMOVE HER FROM LLO	<u>C, </u>		
			
			
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ive date, if other than the date of filing:	Š.,	C	
fective date is listed, the date must be specific and cannot be prior to date of filing or more that If the date inserted in this block does not meet the applicable statutory filing requirement's effective date on the Department of State's records.			
cord specifies a delayed effective date, but not an effective time, 90th day after the record is filed.	at 12:01 a.m. o	n the e	arlier of
September 28 , 2016.			
			_
Signature of a member of authorized representative of a member of a member of authorized representative of a member of a m	ember		
Daniel Hamilton			

Page 3 of 3

Filing Fee: \$25.00