(Re	equestor's Name)	
(Ad	dress)	
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(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

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COVER LETTER

TO:

Registration Section

Division of Cor	porations				
Gulf Electr	FLORIDA ical- Service LLC				
SOBJECT:	Name of Lin	ited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
	Patricia Nasrallah				
		Name of Person			
	Prime Time Permits				
		Firm/Company			
8604 E Sligh Ave					
	Tampa FL 33610	Address			
	Tampa FE 33010	City/State and Zip Code			
	patti@primetimepermits.co	m			
For further information c	E-mail address: (oncerning this matter, please c	to be used for future annual report of	otification)		
Patricia Nasrallah	oncerning and matter, prease c	813 695-9203			
Name of Person		at () Area Code Days	time Telenhone Number		
Traine 0	11 0.3011	, aca code			
Enclosed is a check for th	ne following amount:				
■ \$25.00 Filing 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)		
Mailing Address		Street Address:			
Registration S Division of C		Registration S Division of C			
P.O. Box 632		The Centre of			
Tallahassee, I	FL 32314	2415 N. Mon	roe Street, Suite 810		

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

and assigned or the abbreviation "L.L.C."				
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or the abbreviation "L.L.C."				
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TAUG CRETA				
he name of the new registere				
				
_				
Enter Florida street address				
rida				
Zip Code				

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>	<u>Address</u>	Type of Action
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			□Remove
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Effective date, if other than t	ne date of filing:			(optio	nal)		
fan effective date is listed, the date n Note: If the date inserted in this	iust be specific and canno	t be prior to date	of filing or more	than 90 days after	filing.) Pursu	ant to 605.0 of be liste	0207 (d as t
document's effective date on the	Department of State's	records.		•			
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August 4	-0-	*-					
Dated August 4	 ·	 •					
Dated August 4	Signature of a membe	· ·					

Filing Fee: \$25.00