11700015607

(Re	equestor's Name)	
(Ac	idress)	ii
	ddress)	
(Ĉi	ty/State/Zip/Phone #)	
☐ PICK-UP	☐ WAIT	MAIL
(Bı	usiness Entity Name)	
(Do	ocument Number)	
Certified Copies	Certificates of	Status
Special Instructions to	Filing Officer:	
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Office Use Only



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FLORIDA DEPARTMENT OF STATE || Division of Corporations

August 25, 2017

WAYNE VANDERMEOLEN 1845 QUEEN PALM DR EDGEWATER, FL 32141

SUBJECT: W. VANDERMEULEN ELECTRICAL SERVICES, LLC

Ref. Number: L17000015607

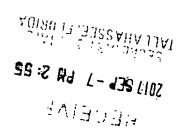
We have received your document for W. VANDERMEULEN ELECTRICAL SERVICES, LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The attached form must be completed in order to file the document.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Octavia L Simmons Regulatory Specialist II

Letter Number: 117A00017610



<u>}</u>	COVERLETTER
TO: Registration Section Division of Corporations	
SUBJECT: Change of	imited Liability Company
Name of	Limited Liability Company
The enclosed Articles of Amendment and fee(s) are	submitted for filing.
Please return all correspondence concerning this mid	
<u> </u>	AYNE VAIDELLECLEN Name of Person
	Name of Person
	W. Vander Heslan Electrical Services, CC
	W. Vander Hevlan Electrical Services, UC Firm/Company 18 45 QUEEN Palm DR. Address
	Address
	Stewater Florida 32141 City/State and Zip Code
	Vander Mevlen electric & g mail. Com
	s: (to be used for future annual report notification)
For further information concerning this matter, pleas	e call:
Wayne Vun derfecte	at (386) 444 - 3120 Area Code Daytime Telephone Number
Name of Person	Area Code Daytime Telephone Number
Enclosed is a check for the following amount:	
□ \$25.00 Filing Fee \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certified Copy Certificate of Status & (additional copy is enclosed) Certified Copy (additional copy is enclosed)
MAILING ADDRESS: Registration Section Division of Corporations	STREET/COURIER ADDRESS: Registration Section Division of Corporations
P.O. Box 6327 Taflahassee, FL 32314	Clifton Building 2661 Executive Center Circle

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	len Stephant Services <u>646</u>
(Name of the Limited	Liability Company as it now appears on our records.) Florida Limited Liability Company
(n	Critorida Elimited Eliability Company
The Articles of Organization for this Limited Lin	oility Company were filed on
1 17000	15/07
Florida document number <u>L 170000</u>	<u> </u>
This amendment is submitted to amend the follow	ving:
A. If amending name, <u>enter the new name of t</u>	1560.7 ving: he limited liability company here:
A. If amending name, enter the new name out	ne minteu napinty Company nere.
	ω'
The new name must be distinguishable and contain the wor	ds. I imited I iability Company." the designation. "LLC" or the abbreviation. "LLC"
Enter new principal offices address, if applical	ole: It 33 och Brook dr.
(Principal office address MUST BE A STREET	
Frincipal office undress in 0.51 BE A STREET	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	(Hunglob) New 1845 QUER' Palm DE OX) FDEEN'S TEK FLUTTER 5214)
B. If amending the registered agent and/oregistered agent and/or the new registered off	1
Name of New Registered Agent:	WAYNE VANDERHEULEN 1845 QUEEN PELM DE
New Registered Office Address:	1845 QUEEN FRIM DR
	Edgewater . Florida 32.141

New Registered Agent's Signature, if changing Registered Agent:

Thereby 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. Thereby 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 amendin or removed	g Authorized Person(s) authoriz	ed to manage, <u>enter the title, name, and</u>	address of each person being added
MGR = N AMBR = A	danager Authorized Member		
<u>Title</u>	<u>Name</u>	<u>Address</u> '	Type of Action
			Add
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ctive date,	if other than t	the date of fil	ing: 6/1/2017 (optional)
👱 If the date	e inserted in this	s block does no	and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.020 meet the applicable statutory filing requirements, this date will not be listed as
ment's effec	ctive date on the	2 Department o	State's records.
			\parallel date, but not an effective time, at 12:01 a.m. on the earlier o
e 90th da	ay after the r	ecord is filed , /	ä
d	9/	4/201	
		1	(11 1)
	<i>k</i>	NUMU (Signature of	h member or authorized representative of a member
	,	1. 1-	Welker in member or authorized representative of a member VANDEX HEUKEN
	,	2 (A 11.11)	
	<i>k</i> .	<i>VAYW</i>	Typed or printed name of signee

Filing Fee: \$25.00