

L17000042061

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : K110FNNA SERVICES INC
Account Number : 120080000033
Phone : (305)644-3055
Fax Number : (305)644-3052

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
YIRE ELECTRIC LLC**

Certificate of Status	1
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JUN 27 2018
J. HARRIS

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: YIRE ELECTRIC 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:

JACINTO M RAYMUNDO GUZARO

Name of Person

YIRE ELECTRIC LLC

Firm/Company

13011 SW 242 TERRACE

Address

HOMESTEAD, FL 33032

City/State and Zip Code

KRISJOENNA@YAHOO.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JACINTO RAYMUNDO

305 6443055
at ()

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 &
Certified Copy
(additional copy is enclosed)

☐ \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

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

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

YIRE ELECTRIC LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 06/22/2018 and assigned
Florida document number L17000042061

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited 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 ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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

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

Attesting 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>	<u>Type of Action</u>
S	MAGDALENA LETICIA RAYMU	13011 SW 242 TERRACE	<input checked="" type="checkbox"/> Add
		HOMESTEAD, FL 33032	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

1. If transmitting any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

E. Effective date, if other than the date of filing: _____ (optional)
(If an effective date is listed, the date must be at least 15

(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)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

(b) The 90th day after the record is filed.

Dated 06/22/2018

Signature of a member or authorized representative of a member

JACINTO M RAYMUNDO GUZARO

Typed or printed name of signee

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Filing Fee: \$25.00

2018 JUN 26 AM 8:01