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COVER LETTER

TO:	Registration Sect Division of Corpo		••	. "		
04175.4		CTRICAL CONTRATORS,	LLC			
Name of Limited Liability Company						
The e	nclosed Articles of A	mendment and fee(s) are sub	mitted for filing.			
Please	e return all correspond	dence concerning this matter	to the following:			
		ALBERT T ROLLINS IV				
		•	Name of Person	(
		RIGHT ELECTRICAL CO	ONTRACTORS, LLC			
			Firm/Company			
		6189 DREW ST				
			Address			
		BROOKSVILLE, FL 3460	04			
			City/State and Zip Code	 		
		-	ALCONTRACTORS.COM			
		E-mail address: (to be used for future annual report notific	cation)		
For fu	arther information cor	cerning this matter, please ca	all:			
ALBERT T ROLLINS IV 352 942-8892 at (
	Name of I	Person	Area Code Daytime	Telephone Number		
Enclo	osed is a check for the	following amount:				
= \$2	25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 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

RIGHT ELECTRICAL CONTRA	•		
(Name of the Lim	ted Liability Company as It now as (A Florida Limited Liability Compa	opears on our records. ny)	
he Articles of Organization for this Limited I	Liability Company were filed or	n <u>08/25/2017</u> a	and assigned
lorida document number L17000182385	·		
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name	of the limited liability compan	v here:	
The new name must be distinguishable and contain the	words "Limited Liability Company,"	the designation "LLC" or the abbrevia	ntion "L.L.C."
Inter new principal offices address, if appli	cable:		· • • · · · · · · · · · · · · · · · · ·
Principal office address MUST BE A STRE	ET ADDRESS)		Ö
			7.71 7.71
			1
Enter new mailing address, if applicable:			2
Mailing address MAY BE A POST OFFICE BOX)			<u>L</u> n

 If amending the registered agent and registered agent and/or the new registered of the new registered agent and of the new registered of the new regist		s on our records, enter the	name of the n
Name of New Registered Agent:	ALBERT T ROLLINS IV		
New Registered Office Address:	6189 DREW ST		
	Ente	r Florida street address	
	BROOKSVILLE	, Florida ³⁴⁶⁰⁴	
	City	Zi	ip 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 = Manager

AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
AMBR	JENNIFER M ROLLINS	6189 DREW ST	
		BROOKSVILLE, FL 34604	■ Remove
			Change
			□ Remove
			Change
			Add
			☐ Remove
			☐ Change
		·····	Add
			□ Remove
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		***************************************	☐ Remove
			□ Change

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		02/20/2010				
ffective date, if other the an effective date is listed, the d	n the date of fili ate must be specific a	ing: 03/30/2018	to date of filing or n	option (option or than 90 days after	nal) filing.) Pursuani	to 605.02
ote: If the date inserted in ocument's effective date on	this block does no	t meet the applic	able statutory filir			
e record specifies a de The 90th day after th			t an effective	time, at 12:01 a	.m. on the	earlier
MARCH 30		2018	·····•			
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Typed or printed name of signee

Filing Fee: \$25.00