

(Requestor's Name)
(Address)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Sosmess End) (tome)
(Document Number)
Certified Copies Certificates of Status
<u> </u>
Special Instructions to Filing Officer:





200306436942

12/11/17--01013--015 **25.00

FILED
2011 DEC 11 PA 3: 21
SECKETARY OF STATE

K SALY DEC 12 2017

COVER LETTER

	on Section f Corporations
T & F SUBJECT:	Electronics and Communication LLC
	Name of Limited Liability Company
The enclosed Articl	es of Amendment and fee(s) are submitted for filing.
Please return all co	rrespondence concerning this matter to the following:
	Eugene Laurent
	Name of Person
	T & E Electronics and Communications LLC
	Firm/Company
	3641 Elizabeth Street
	Address
	Palm Springs Florida 33461
	City/State and Zip Code
	GENO.LAURENT@YAHOO.COM E-mail address: (to be used for future annual report notification)
For further informa	tion concerning this matter, please call:
Eugene Laurent	561 3319718 at ()
N	ame of Person Area Code Daytine Telephone Number
Enclosed is a check	for the following amount:
■ \$25.00 Filing F	ee \$\Bigcup \$30.00 \text{ Filing Fee & Bound Filing Fee & Certificate of Status & Certified Copy (additional copy is enclosed)} \Bigcup \$60.00 \text{ Filing Fee & Certified Copy (additional copy is enclosed)} \Bigcup \$60.00 \text{ Filing Fee & Certified Copy (additional copy is enclosed)} \Bigcup \$60.00 \text{ Filing Fee & Certified Copy (additional copy is enclosed)} \Bigcup \$60.00 \text{ Filing Fee & Certified Copy (additional copy is enclosed)} \Bigcup \$60.00 \text{ Filing Fee & Certified Copy (additional copy is enclosed)} \Bigcup \$60.00 \text{ Filing Fee & Certified Copy (additional copy is enclosed)} \Bigcup \$60.00 \text{ Filing Fee & Certified Copy (additional copy is enclosed)} \Bigcup \$60.00 \text{ Filing Fee & Certified Copy (additional copy is enclosed)} \Bigcup \$60.00 \text{ Filing Fee & Certified Copy (additional copy is enclosed)} \Bigcup \$60.00 \text{ Filing Fee & Certified Copy (additional copy is enclosed)} \Bigcup \$60.00 \text{ Filing Fee & Certified Copy (additional copy is enclosed)} \Bigcup \$60.00 \text{ Filing Fee & Certified Copy (additional copy is enclosed)} \Bigcup \$60.00 \text{ Filing Fee & Certified Copy (additional copy is enclosed)} \Bigcup \$60.00 \text{ Filing Fee & Certified Copy (additional copy is enclosed)} \Bigcup \$60.00 \text{ Filing Fee & Certified Copy (additional copy is enclosed)} \Bigcup \$60.00 \text{ Filing Fee & Certified Copy (additional copy is enclosed)} \Bigcup \$60.00 \text{ Filing Fee & Certified Copy (additional copy is enclosed)} \Bigcup \$60.00 \text{ Filing Fee & Certified Copy (additional copy is enclosed)} \Bigcup \$60.00 \text{ Filing Fee & Certified Copy (additional copy is enclosed)} \Bigcup \$60.00 \text{ Filing Fee & Certified Copy (additional copy is enclosed)} \Bigcup \$60.00 \text{ Filing Fee & Certified Copy (additional copy is enclosed)} \Bigcup \$60.00 \text{ Filing Fee & Certified Copy (additional copy is enclosed)} \Bigcup \$60.00 \text{ Filing Fee & Certified Copy (additional copy is enclosed)} \Bigcup \$60.00 Filing Fee & Certified Copy (addi

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 ()F

PILED

2017 DEC 11 PA 3:21

FALLAHASSEE, FLORIOA

T & E ELECTRONICS AND COMMUNICATIONS 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 L Florida document number L17000224521	iability Company	were filed on 10/30/	/2017	and assigned
This amendment is submitted to amend the foll	owing:			
A. If amending name, enter the new name o	f the limited liah	ility company here:		
The new name must be distinguishable and contain the v	vords "Limited Liabi	lity Company," the desig	mation "LLC" or the al	obreviation "L.L.C,"
Enter new principal offices address, if applic	able:			
(Principal office address MUST BE A STREE	T ADDRESS)	N/A		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	<u>BOX)</u>	N/A		
B. If amending the registered agent and registered agent and/or the new registered of Name of New Registered Agent:			ur records, <u>enter</u>	the name of the new
	N/A	_		
New Registered Office Address:		Enter Florida	street address	
			Florida	
		City		Zip Code
New Registered Agent's Signature, if changing l	Registered Agent:	r		

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	EUGENE LAURENT	3641 ELIZABETH STREET, PAL	■ Add
			□ Remove
			□ Change
			Add
			□ Remove
		· · · · · · · · · · · · · · · · · · ·	☐ Change
			SECREDAN Y DCharge S
			HASSEE FLOAD
		·	Remove
			Change
		· · · · · · · · · · · · · · · · · · ·	Add
			Remove
			□ Change
			Add
			□ Remove

		-	
	·		·
<u> </u>			
-			
		•	
			
	<u> </u>		700
			See B
		••	
			75
<u> </u>			
			· · · · · · · · · · · · · · · · · · ·
			
ective date, if other than the date must be	ate of filing:e specific and cannot be prior to	a date of filing or more than 90	(optional) days after filing A Pursuant to 605 020
te: If the date inserted in this bloc	k does not meet the applical		
cument's effective date on the Dep	artment of State's records.		
record enecifies a delayed	offostivo data but ant	an offactive times -t	13:01 p m an the security
record specifies a delayed of The 90th day after the recor		an enective time, at	12:01 a.m. on the earlier c
NOVEMBER 22.	2017		
		_	
C7_	Para t.	ized representative of a memb	

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00