(Requestor's Name)
(Address)
(Address)
(13333)
(0) (0) + (7) (0)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
,
Cartifical Casins Cartification of Status
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



200322192792

12/27/18--01027--013 \*\*23.00

S TALLEN" JAN 1 4 2019

## **COVER LETTER**

Div	ision of Corpo	orations		
SUBJECT:		ical Solutions, LLC		
oo bone (		Name of Limit	ed Liability Company	
The enclosed	l Anicles of A	mendment and fec(s) are subn	nitted for filing.	
Please return	all correspond	dence concerning this matter to	o the following:	
		Lemay Marin		
		Marin Electrical Solutions, LI	Name of Person	
		9802 NW 80th Ave Suite 47	Firm/Company	
		Hialeah Gardens, FL 33016	Address	
		lemay.marin@marinelectrical		<i>v</i>
			be used for future annual report notific	cation)
or further in	iformation con	cerning this matter, please cal	1:	
may Mar	in 		305 992-5457 at ()	
	Name of F	Person	Area Code Daytime	Telephone Number
osed is a	check for the	following amount:		
325.00 F	iling 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:

TO:

**Registration Section** 

Registration Section Division of Corporations P.O. Box 6327 Talluhassee, 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

(Name of the Limit	ed Liability Compa (A Florida Limited	iny as it now appears on o Liability Company)	ur records.)	<del></del>
The Articles of Organization for this Limited Li Florida document number <u>L18000008786</u>	ability Company	were filed on 01/10/2	018	and assigned
This amendment is submitted to amend the follo	owing:			
A. If amending name, enter the new name of	the limited liab	ility company here:		
The new name must be distinguishable and contain the w	ords "Limited Liabi	lity Company," the designa	tion "LLC" or the ab	breviation "L.1C."
Enter new principal offices address, if application	able:	9802 NW 80th Ave	Bay 47	
(Principal office address MUST BE A STREE		Hialeah Gardens, F	L 33016	
		<del></del>		<b></b>
Enter new mailing address, if applicable:		9802 NW 80th Ave	Bay 47	FIL DEC 27
Mailing address MAY BE A POST OFFICE BOX)		Hialeah Gardens, F	L 33016	in in
If amending the registered agent and/gistered agent and/or the new registered of	or registered of fice address her	ffice address on our e:	records, enter	the name of the nev
Name of New Registered Agent:	Mabel Marin	<del></del>		
New Registered Office Address:	9802 NW 80th	1 Ave Bay 47		
	<del></del>	Enter Florida str	eet address	
	Hialeah Garde	ens		016
		City		Zip Code

Registered Agent's Signature, if changing Registered Agent:

Marin Electrical Solutions LLC

the appointment as registered agent and agree to act in this capacity. I further agree to comply with the sions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and t the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is filed to merely reflect a change in the registered office address. I hereby confirm that the limited liability my has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

Page 1 of 3

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>	Address	Type of Action
		<del> </del>	☐ Remove
			☐ Change
		<del></del>	
			□ Remove
			Change
			□ Add
			☐ Remove
			☐ Change
	<del></del>		□ Add
			□ Remove
			☐ Change
~~		-	Add
		<del></del>	☐ Remove
		<del></del>	☐ Change
-		<del></del>	□ Add
		<del></del>	☐ Remove
			☐ Change

it amending any c	other information, enter change(s) here: (Attach additional sheets, if necessary.)
<del></del>	
<del></del>	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
<del></del>	
<del></del>	
<del></del>	
<u></u>	
<del></del>	
Note: If the date in	sted, the date of filing:
	ies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of after the record is filed.
ted 12	21 2018
·	
<del></del>	Signature of a member or authorized representative of a member
	Certay Marin Typed or printed name of signee
<del></del>	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00