## 

(Requ	iestor's Name)	
(Addr	ess)	
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(City/s	State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Busi	ness Entity Nar	me)
(Doci	iment Number)	)
Certified Copies	Certificate:	s of Status
Special Instructions to Fi	ling Officer:	
		:

Office Use Only









## **COVER LETTER**

Div	ision of Cor	porations		
SUBJECT:		CTRICAL LLC		
SUBJECT.		Name of Lin	nited Liability Company	
The enclosed	I Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return	all correspo	ndence concerning this matter	to the following:	
		JULIANA DOS SANTOS	S	
		GFS TAX & ACCOUNT	Name of Person ING SERVICES	
		2001 W CYPRESS CRE	Firm/Company EEK RD STE 102B	<u>.                                    </u>
		FORT LAUDERDALE, F	Address FL 33309	
		INFO@GFSTAXACCT.C		
lior further in	formation as	E-mail address: ( oncerning this matter, please c	to be used for future annual report notifie	cation)
JULIANA D	Name of		954 957-3244 at () Area Code Daytime	Telephone Number
Enclosed is a	check for the	e following amount:		
□ \$25.00 Fi	ling Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (udditional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
		NG ADDRESS:	STREET/COURIE	R ADDRESS:

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

TO:

**Registration Section** 

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

AV & ELECTRICAL LLC		
(Name of the Limited Liability Comps (A Florida Limited	iny as it now appears on our records.) Liability Company)	<del> </del>
The Articles of Organization for this Limited Liability Company	were filed on 05/24/2018	and assigned
Florida document number L18000130504		
his amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
OM AIR & ELECTRICAL LLC		
he new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the abb	reviation "L.L.C."
Enter new principal offices address, if applicable:	1151 FLORANADA ROAD	
Principal office address MUST BE A STREET ADDRESS)	OAKLAND PARK, FL 33334	6 -
		m —
		至口
inter new mailing address, if applicable:	1151 FLORANADA ROAD	φ
Mailing address MAY BE A POST OFFICE BOX)	OAKLAND PARK, FL 33334	17
. If amending the registered agent and/or registered of egistered agent and/or the new registered office address here	fice address on our records, <u>enter ti</u> e:	ne name of the
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

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person</u> <u>being added</u> <u>or removed from our records</u>:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<b>Type of Action</b>
AMBR	ALEXANDRE CABRAL	1151 FLORANADA RD	
			Add
		OAKLAND PARK, FL 33334	
			□ Remove
			☐ Change
MGRM	OM AIR SERVICES INC	1151 FLORANADA RD	
	<del></del>		<b>=</b> Add
		OAKLAND PARK, FL 3334	
		<del></del>	Remove
			Change
MGRM	ALEX CORREA	6139 NW 41ST DR	
		00041 0000100 51 0000	Add
	•	CORAL SPRINGS, FL 33067	
			Remove
			Change
AR	EDGAR PONS	6139 NW 41ST DR	
		CORAL CORING EL CORGE	
		CORAL SPRING, FL 33067	
			Remove
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			Remove 47
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			Remove
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. If amending any other	information, enter	change(s) here:	(Attach additional sh	eets, if necessary.)
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Effective date, if other t	han the date of filir	ng:		(optional)
(If an effective date is listed, the	e date must be specific ar	nd cannot be prior to a	date of filing or more than	( <b>optional)</b> 90 days after filing.) Pursuant to 605.0207 (2 ements, this date will not be listed as th
document's effective date	on the Department of	State's records.	innig requi	emons, this dute will not be listed as t
the record specifies a	dolayed offering	<b></b>		
The 90th day after	the record is filed	date, but not a J.	in effective time, a	t 12:01 a.m. on the earlier of:
AUGUST 28TH	,	2010		
Dated AUGUST 28TH	<del></del>	2018		
	Al.			
7	Signature of a	member or authorize	ed representative of a men	nber
ALEX CORRE	E <b>A</b>			

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Typed or printed name of signce

Filing Fee: \$25.00