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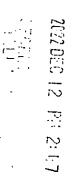
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COVER LETTER

TQ: Registration S Division of Co		4	4
	TRIC LLC		,
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles of	f Amendment and fee(s) are sub	omitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	NEALE BOYEA		
		Name of Person	
	NB ELECTRIC LLC		
		Firm/Company	
	700 E AMERICAN EAG	LE DRIVE	
		Address	
	ST. AUGUSTINE FL 320	992	2022 DEC
		City/State and Zip Code	
	nbelectric03@gmail.com		. •
	E-mail address: (to be used for future annual report noti	neation)
For further information	concerning this matter, please c	all:	0
NEALE BOYEA		904 2063942 	
Name	of Person		e 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 Addre		Street Address:	etion
Registration Division of 0	Section Corporations	Registration Sec Division of Cor	
P.O. Box 63		The Centre of T	•
Tallahassee,	FL 32314	2415 N. Monro	e Street. Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Compa (A Florida Limited	iny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number 1.18000154407	were filed on 04/10/2018	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	oility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or t	he abbreviation "L.L.C."
Enter new principal offices address, if applicable:	6900 PHILIPS HIGHWAY SUITE	47
(Principal office address MUST BE A STREET ADDRESS)	JACKSONVILLE FL 32216	72
		70 Z

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

Name of New Registered Agent:		
New Registered Office Address:		
-	Enter Florida street addres	TS.
	Flo	orida
	City	Zin Code

New Registered Agent's Signature, if changing Registered Agent:

NB ELECTRIC LLC

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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
P	NEALE BOYEA	700 E AMERICAN EAGLE DRIVE	
		ST. AUGUSTINE FL 32092	□Remove
			Change
P	BRANDON BLAKE	700 E AMERICAN EAGLE DRIVE	□Add
		ST. AUGUSTINE FL 32092	Remove
			□Change
			□Remove
			□ Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□ Add
			□Remove

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If the date inserted in this bloc ent's effective date on the Dep		statutory filing requirements, this date	will not be list
,			
d specifies a delayed effective	date, but not an effective time, a	t 12:01 a.m. on the earlier of: (b) Th	e 90th day afte
ed.			
DECEMBER 5	2022		
DECEMBER 5			
J120	1 Bruss	representative of a member	

Filing Fee: \$25.00