## 118000253372

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K. SALY NOV 20 2018

## **COVER LETTER**

Div	vision of Corp	porations		
SUBJECT:		-WAY ENERGY SERVICES	S L.L.C	
00000000		Name of Limi	ited Liability Company	
The enclose	d Articles of a	Amendment and fee(s) are sub-	mitted for filing.	
Please returi	n all correspoi	ndence concerning this matter	to the following:	
		ALEJANDRA ARCAS LAZO	)	
			Name of Person	
		RIGHT-OF-WAY ENERGY	SERVICES LLC	
			Firm/Company	
		711 ARTISAN ST		
		できた。 でである。 ORLANDO, FL, <del>3034</del> 5	Address	
		alejandrarcaslazo@gmail.co		
		E-mail address: ()	to be used for future annual report notifi-	cation)
For further i	information co	oncerning this matter, please ca	all:	
ALEJANDI	RA J ARCAS	5	470 3469461	
	Name of	Person	at ()Area Code Daytime	Telephone Number
Enclosed is	a check for th	e 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 ADDRESS:

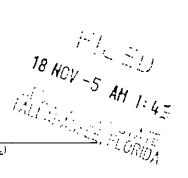
TO:

Registration Section

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-OF-WAY ENERGY SERVICES 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 Liability	Company were filed	on October 29, 2018	and assigned
Florida document number L18000253372			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the lin	mited liability compa	any here:	
The new name must be distinguishable and contain the words "Li	mited Liability Company.	"the designation "LLC" or the	e abbreviation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADD	ORESS)		
		<del></del> .	
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
			<del></del>
B. If amending the registered agent and/or reg registered agent and/or the new registered office ad	•	ess on our records, <u>ent</u>	er the name of the new
Name of New Registered Agent:			
		<del></del>	
New Registered Office Address:	En	ter Florida street address	
		Florida	
	City	Florida	Zip Code
New Registered Agent's Signature, if changing Register	red Agent:		
I hereby accept the appointment as registered agen provisions of all statutes relative to the proper and accept the obligations of my position as registered being filed to merely reflect a change in the registe company has been notified in writing of this change	complete performat agent as provided fo red office address. I	nce of my duties, and La or in Chapter 605, F.S. (	m familiar with and Or, if this document is

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\_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	ALEJANDRA J ARCAS	711 ARTISAN ST. ORLANDO, FL, 32824	
			Add
			□ Remove
			Change
			Chame 7
			Add
			Remove.
			□ Add
			Remove
			Change
			Add
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	<del></del>
-	
Effective da	ate, if other than the date of filing:
Note: If the	date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as
document's	effective date on the Department of State's records.
ne record :	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier o
	n day after the record is filed.
11/01	
Dated	
	Signature of a member or authorized representative of a member
Д	ALEJANDRA J ARCAS
_	Typed or printed name of signee

, D.

Page 3 of 3

Filing Fee: \$25.00