1190000 26939

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

Office Use Only



200330118082

200330118082 06/06/19--01007--031 **60.00

TALL AHASSA PH 1:37

JUN 21 2019 TECKROEDER

COVER LETTER

Division of Co		p s	
Napoli Ele SUBJECT:	ectric	,	
	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	emitted for filing.	
Please return all correspondent	ondence concerning this matter	to the following:	
	Lawrence Merlino		
	Napoli Electric LLC	Name of Person	
	1200 Clint Moore Rd. suite	Firm/Company	
	Boca Raton, FL 33487	Address	
	napolielectricfl@gmail.com	City/State and Zip Code	
For further information of	E-mail address: (concerning this matter, please c	to be used for future annual report notifi all:	ication)
Lawrence Merlino		609 204-9240	
Name o	f Person		Telephone Number
Enclosed is a check for t	he 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:

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

Napoli Electric LLC						
(Name of the Lim	ited Liability Compa (A Florida Limited	ny as it now appears on o Liability Company)	ur records.)			
The Articles of Organization for this Limited I Florida document number L19000026939	Liability Company	were filed on <u>1/25/19</u>	and assigned			
This amendment is submitted to amend the fol	lowing:					
A. If amending name, enter the new name of	of the limited liab	ility company here:				
N/A						
The new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the designat	tion "LLC" or the abbreviation "L.L.C."			
Enter new principal offices address, if applicable:		N/A	<u> </u>			
(Principal office address MUST BE A STRE	ET ADDRESS)	· · · · · · · · · · · · · · · · · · ·				
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	<u>: BOX)</u>	N/A	JUN-6 PM I: 87			
B. If amending the registered agent and registered agent and/or the new registered of			records, enter the name of the nev			
Name of New Registered Agent:						
New Registered Office Address:	1200 Clint Moore RD. suite 6					
	Enter Florida street address					
	Boca Raton		Florida ³³⁴⁸⁷			
		City	Zip Code			
New Registered Agent's Signature, if changing I hereby accept the appointment as register, provisions of all statutes relative to the propaccept the obligations of my position as reg being filed to merely reflect a change in the company has been notified in writing of this	ed agent and agro per and complete istered agent as p registered office	ee to act in this capac performance of my di provided for in Chapte	uties, and I am familiar with and er 605, F.S. Or, if this document is			

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>	<u>Name</u>	Address	Type of Action
MGR	Spencer Blank	1200 Clint Moore Rd suite 6 Boca Raton, FL 33487	
			ਜ਼ Add
			☐ Remove
		-	LI Kellove
			Change
		 	Remove
			Change
			□ Add
			□ Remove
			☐ Change
			15 15 15 15 15 15 15 15 15 15 15 15 15 1
			Remove
			Change
			□ Add
			□ Remove
			☐ Change
			□ Add
			☐ Remove
			Change

LLC. also changing address	ss of LLC to 1200 Clint Me	oore Rd. Boca Ra	aton FL 33487.			
		···	··			
		·				
					······································	
						
				Mgs		
					ے و	*****
				SS.	- Z - 1	<u>-</u>
M-Education Property.				m _e	<u> </u>	<u>.</u> [T
					<u> </u>	E
				ORIE ORIE	<u>ယ</u> ု	
				λ.	7	
		- , , , , , , , , , , , , , , , , , , ,	-			
ctive date, if other than t	N/A he date of filing:			_ (optional)		
effective date is listed, the date is: If the date inserted in this	must be specific and cannot b	e prior to date of fi	ling or more than 90 (days after filing.) Pu		
ment's effective date on the			ny ming requirem	ones, this date wit	i ilot oc	11310
ecord specifies a delay le 90th day after the r	red effective date, but ecord is filed	ut not an effe	ctive time, at 1	.2:01 a.m. on	the ea	rlie
o sour day arear ener	ccord is mean					
May 29 d	2019		`			
	70					

Page 3 of 3

Filing Fee: \$25.00