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(Rec	questor's Name)
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(City	/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(Bus	iness Entity Name)
(Doc	cument Number)
Certified Copies	Certificates of Status
Special Instructions to F	Filing Officer:
	Office Use Only



04/10/19--01004--010 **25.00



4/10/19 05

A COVER LETTER

TO: Registration Section Division of Corporations

5.

SUBJECT: SUNTISC Electric LLC Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Joseph Scutt Name of Person Schnise Electric LLC Flrm/Company ₹ 2 287 Orange St Unit103 0 Hurber FL 34683 Otty/State and Zin Code Ð م J Q Swetta qmail. Com E-mail address: (to be used to future annual report notification)

For further information concerning this matter, please call;

Joseph at (727) <u>410 - 0218</u> Area Code Daytime Telephone Number Name of Person

Enclosed is a check for the following amount:

𝕊 \$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	
$\frac{\sum_{i=1}^{N} \frac{\sum_{i=1}^{N} $	records.)
This amendment is submitted to amend the following: A. If amending name, <u>enter the new name of the limited liability company here</u> :	14 C 28
The summary server by draw and the barrier of the b	
The new name must be distinguishable and contain the words "Limited Liability Company," the designation Enter new principal offices address, if applicable:	THAN T
(Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	FF 08102

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

Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street ad	dress
		Florida
	City	Zip Code

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

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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 being added</u> or removed from our records:

MGR = Manager AMBR = Authorized Member

• •

<u>Title</u>	Name	Address	Type of Action
<u>MGR</u>	Sunrise Blue - Collar Broup		bbA
		2810rungeSt. Un	+103 Pc/m Harborn, FC 34683
MGR	Joseph Swett	287 Orange 57	
			🖸 Add
			Remove
			Change
			Add
			Change
			Add
			Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated 10 April . D 4 Signature of a member or authorized representative of a member Joseph Swith yped or printed name of signee

Page 3 of 3

Filing Fee: \$25.00