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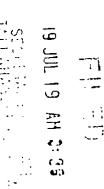
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Special Instructions to	Filing Officer:	
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COVER LETTER

TO: Registration S Division of Co			
subject: <u>A. M</u>	I.P. Euchc Name of Lin	AR. AP DIVISI	ON LIMITED LIABIL
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:	
	BILLYLQ	ODSE V JP	
	A.M.P Ele	Ctric AR.AP	DIVISION. LIMITED LIABILITY CON
		54th Street	
	For. Law	derdale, FL 3	33304.
	E-majl address:	City/State and Zip Code 2019 @ amail to be used for future annual report noti	Com_ fication)
For further information c	concerning this matter, please ca	nll:	
Amelia	SWELL- of Person	at (954) 763 Area Code Daytime	Telephone Number
Enclosed is a check for the	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:

TO:

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

A.M.P. ELECTRIC AR.A	1P DIVISION LIMITED	<u>UABIUT</u>
(<u>Name of the Limited Liability Comp</u> (A Florida Limited	Liability Company)	COMPAI
The Articles of Organization for this Limited Liability Company Florida document number <u>L1906008924</u>	y were filed on	2 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lial	bility company here:	
The new name must be distinguishable and contain the words "Limited Liab	ility Company," the designation "LLC" or the abb	reviation "L.L.C."
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	1430 NE 54 Fort Involvedal	Street FL
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1430 NE 54 Fort. Landerdale	Street , FL
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		he name of the ne
Name of New Registered Agent:		<u> </u>
New Registered Office Address:		0 -
	Enter Florida street address	2
	Florida	Zip Code
	Cuy	Lip 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, enter the title, name, and address of each person—being add or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
MGR	Billy L Godsey Jr.	1430 NE 54th Street Fort. Lauderdale, FL 33304	
	,	Fort. Lauderdale, FL 33304	☐ Remove
			Change
			
			Remove
			Change
			🗆 Add
			🗆 Remove
			🗆 Change
			🗆 Add
			□ Remove
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			□ Add
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			Change
			□ Add
			_□ Remove
			☐ Change

	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
•	
-	
(If an ef No te:	ive date, if other than the date of filing:
he red The	cord specifies a delayed effective date, but not an effective tirne, at 12:01 a.m. on the earlier of 90th day after the record is filed.
Dated	July 15 2019.
	Signature of a member or authorized representative of a member
	Signature of a member or authorized tepresentative of a member

Page 3 of 3

Filing Fee: \$25.00