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(Re	equestor's Name)	
(Ac	ldress)	
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(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bı	usiness Entity Nan	ne)
(Do	ocument Number)	
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Amend

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COVER LETTER

TO:	Registration Se Division of Cor			
CHD H		ΓRICAL & ENGINEERING S	ERVICES LLC	
SUBJI	ECT:	Name of Lim	ited Liability Company	· · · · · · · · · · · · · · · · · · ·
The en	nclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please	return all correspo	ondence concerning this matter	to the following:	
		NELSON LIZAZO		
		P.A.C.E. POWER AUTON	Name of Person MATION CONTROLS ENGINEER	ING, LLC
		11341 NW 39TH STREET	Firm/Company	
		SUNRISE, FL 33323	Address	
		info@pacengineeringllc.com		
			to be used for future annual report notifi	ication)
For fur	ther information c	oncerning this matter, please ca	all:	
NELS	ON LIZAZO		954 6555308 at ()	
	Name o	f Person		Telephone Number
Enclos	ed is a check for th	ne following amount:		
■ \$2.	5.00 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

360 ELECTRICAL & ENGINEERING 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 $\frac{4/12/2019}{2}$ ____ and assigned Florida document number L19000102130 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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.

City

If Changing Registered Agent, Signature of New Registered Agent

__, Florida ___

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	<u>Address</u>	Type of Action
PRES	NELSON LIZAZO	11341 NW 39TH ST. SUNRISE, FL 33323	B Add
			□ Remove
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Effective date, if other than (If an effective date is listed, the da Note: If the date inserted in t document's effective date on	te must be specific and cannot balls block does not meet the	be prior to date of filing or mor applicable statutory filing	(optional) e than 90 days after filing.) Pursuan requirements, this date will not	nt to 605.0207 (be listed as t
the record specifies a del) The 90th day after the	ayed effective date, b record is filed.	ut not an effective tir	ne, at 12:01 a.m. on the	earlier of:
Dated JULY 12	2019			
				
	Signed to of a marrhage	or authorized representative o	i a momber	

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00