IAAAA	1921211
LADUU	10267
(Requestor's Name)	
(Address)	
(Address)	500335233205
(City/State/Zip/Phone #)	2011 CCT 2.3
PICK-UP WAIT MAIL	
(Business Entity Name)	- ŭ
(Document Number)	
Certified Copies Certificates of Status	19 CT 2.3
Special Instructions to Filing Officer.	ج برا ه
Office Use Only	
	OCT 24 2019
	M. SOLOMON

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195 REFERENCE : 022028 4328337 AUTHORIZATION : Joneth Clement COST LIMIT : \$ 55.00 ORDER DATE : October 23, 2019 ORDER TIME : 3:29 PM

ORDER NO. : 022028-005

CUSTOMER NO: 4328337

DOMESTIC AMENDMENT FILING

NAME :	DUVAL	ELECTRICAL	SUPPLY,
	LLC		

EFFECTIVE DATE:

XX ARTICLES OF AMENDMENT RESTATED ARTICLES OF INCORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

- XX_____ CERTIFIED COPY
- _____ PLAIN STAMPED COPY
- _____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Amanda Robinson -- EXT# 62968

EXAMINER'S INITIALS:

• , • , , , ,

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

DUVAL ELECTRICAL SUPPLY, 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 <u>07/29/2019</u> and assigned Florida document number <u>L19000183634</u>.

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)		26
		<u>с</u> ц
	 	8
		:
Enter new mailing address if applicables		6.5 C.2
Enter new mailing address, if applicable:	 	
(Mailing address MAY BE A POST OFFICE BOX)	 	
		F.
	1.	

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 addre	
	, F	lorida
	City	Zip 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 added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
MGR	JANICE H. CASWELL	9595 SUNBEAM CENTER DR.	Add
		JACKSONVILLE, FL 32257	Remove
			Change
President	JANICE H. CASWELL	9595 SUNBEAM CENTER DR.	🖬 Add
		JACKSONVILLE, FL 32257	Remove
			Change
		·····	Change
			Add
		,,	Remove
			Change
·		·	O Add
			Remove
			Change
			🗆 Add
			CRemove
			Change

.

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

······································
· · · · · · · · · · · · · · · · · · ·
· ····
· ····

E. Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b) <u>Note:</u> If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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 October	23, 2019
	Signature of a member or authorized representative of a member
	JANICE H. CASWELL
	Typed or printed name of signee

Page 3 of 3 Filing Fee: \$25.00