L200000 28326

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COVER LETTER

TO:

Registration Section Division of Corporations

DUQUE EI	LECTRICAL SERVICES LLC				
SUBJECT:	Name of Lim	ited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
	OSVALDO DUQUE				
		Name of Person			
	DUQUE ELECTRICAL S	ERVICES LLC			
		Firm/Company	4		
	2928 VASSALLO AVE				
		Address			
	LAKE WORTH, FL 3346	I			
		City/State and Zip Code			
	Famail addresses	to be used for future annual report not	ification)		
For further information c	oncerning this matter, please c	·			
JANE PEREZ		56] 3862926			
Name o	f Person		ne Telephone Number		
Enclosed is a check for the	ne 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 S		Street Address:	ection		
Division of C		-	Registration Section Division of Corporations		
P.O. Box 632	-		The Centre of Tallahassee		
Tallahassee, 1	FL 32314	2415 N. Monro	2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Marka 21 Mars 55

DUQUE ELECTRICAL 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 $\frac{01/22/20}{}$	20 and assigned
Florida document number L20000028326		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designal	ion "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 a	address on our record	s, enter the name of the new register
agent and/or the new registered office address here:		
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida stre	
	City	, Florida Zip Code
Nam Danistanad Apant's Cignatura if shanning Desistand Asset	Cuỳ	ZIр Соне
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agree	ee to act in this capac	ity. I further agree to comply with t

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 amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person</u> <u>being added</u> <u>or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	OSVALDO DUQUE	928 VASSALLO AVE, LAKE WORTH FL 33461	= Add
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ord specifies a delaye	ed effective date, but not ar	n effective time, at 12:	01 a.m. on the earlier of: (b.	The 90th day after th
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Typed or printed name of signee