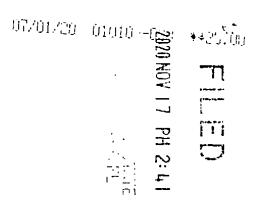
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PICK-UP	☐ WAIT	MAIL
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COVER LETTER

ΓΟ: Registration Sec Division of Corp			
1/0/3	tr'u electrica	\ 11.6.	
SUBJECT: 1981		ited Liability Company	
The enclosed Articles of a	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	Brandon	Name of Person	
	Neith	Firm/Company	LC
	(1, 7,		
	6/2 Lack	nary of	
	1 1	7 daices	
	APOPKa, FI	32712 City/State and Zip Code tr. cal @ gmail. Cog	
	Neltricelect	trical@. gmail. (ou	m
	E-mail address: (to be used for future annual report notif	ication)
For further information ed	oncerning this matter, please co	all:	
Brandon Name of	Jelson Frerson	at (407) Area Code Daytimo	2 Telephone Number
Enclosed is a check for th	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 Addres		Street Address: Registration Sec	vion
Registration S Division of C		Division of Cor	
P.O. Box 632		The Centre of T	allahassee

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.) hability Company)
The Articles of Organization for this Limited Liability Company Florida document number <u>ER 130157 23</u> .	were filed on 5-1-25 and assigned
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 designation "LLC" or the abbreviation "LLC."
Enter new principal offices address, if applicable:	612 Zachery dr
(Principal office address MUST BE A STREET ADDRESS)	ARRKA F1,32712 3
·	
Enter new mailing address, if applicable:	612 Zachary dr
(Mailing address MAY BE A POST OFFICE BOX)	APOPLA FI, Jalla
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our records, <u>enter the name of the new registered</u>
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	, Florida
New Registered Agent's Signature, if changing Registered Agent:	,
I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as peing filed to merely reflect a change in the registered office company has been notified in writing of this change.	ee to act in this capacity. I further agree to comply with the performance of my duties, and I am familiar with and provided for in Chapter 605, F.S. Or, if this document is
If Chai	nging Registered Agent, Signature of New Registered Agent

f 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> Fitle</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	Brandon Nelson	GIZ Zachary dr Arorka 1 32712	Z) DAdd
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ecord specifies	a delayed effective date	, but not a	n effective t	ime, at 12:0	l a.m. on the	earlier of: (b) The 90t	h day after th
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Filing Fee: \$25.00