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## **COVER LETTER**

TO:	Registration Sec Division of Corp	orations		
SUBJE	ECT:	Quality	Energy Continue of	ecessories and Mer
		Name of Isan	ited Liability Company	
The en	closed Articles of A	Name of Similed Liability Company  ricles of Amendment and fee(s) are submitted for filing.  I correspondence concerning this matter to the following:    I lbeat Company		
Please	return all correspor	dence concerning this matter	to the following:	
		<u>-d1Fi</u>	At Campbell JE	<u> </u>
			Name of Person	, , ,
		Quarity Elect	revice Accessor	ies and more LCC
		57804 La	noster et Toma	E FIX 75619
			Address	
		1 am, 2a,	F1 35619	
			City/State and Zip Code	
		town 1712	of form I can	
		E-mail address: (	to be used for future annual report not	itication)
r	libert C.	insbell JR.	<u> at(さけ) する</u>	9-9361
	Name of	Person	Area Code Daytin	ie Telephone Number
Enclos	ed is a check for the	e following amount:		
		1 <sub>4</sub> ,	□ #55.00 N/P	
□ \$2	5.00 Filing Fee			Contificate of Status &
		Certificate of Status	* *	
			(additional dispy in chemister)	
	Mailing Address	• •	Street Address:	
Registration Section		Registration Se	ection	
Division of Corporations			Division of Co	rporations
	P.O. Box 632	7	The Centre of	l'allahassee
	Tallahassee, F		2415 N. Monro	be Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited	onic Itc	CtS5667	5 which is	lare LCC	
(Name of the Limited	Liability Compa	ny as it now appears	on our records.)		
The Articles of Organization for this Limited Lial	oility Company	were filed on	2-86-5		
Florida document number <u>L2mm6</u>					
This amendment is submitted to amend the follow	ving:				
A. If amending name, enter the new name of t	he limited li <u>ab</u>	ility company her	<u>·e</u> :		
The new name must be distinguishable and contain the wor	ds "Limited Liabil	lity Company," the de	signation "LLC" or the	abbreviation "L.L.C."	_
Enter new principal offices address, if applical	ole:				_
(Principal office address MUST BE A STREET	ADDRESS)			(12)	_
Enter new mailing address, if applicable:				20 /	
(Mailing address MAY BE A POST OFFICE B	<u>OX)</u>			<u></u>	_
				-0 .	- ;
				<u></u>	
B. If amending the registered agent and/or regagent and/or the new registered office address	•	address on our re	cords, <u>enter the na</u>	me of the new Fegist	<u>eret</u>
Name of New Registered Agent:	Hlbest	Hirthony	Campbell	JE.	_
New Registered Office Address:	<del></del>	From Flori	da street address		_
	1 am	J C Cw	, Florida _		_

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.

f 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	<u>Address</u>	Type of Action
			□Add
			Remove
			Change
	<del></del>		
	٠,		□Remove
			□Change
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			□Change
	·.		
			□Remove
			<b>5</b> 1
	•		Remove
	·		□Change
			□Add
			□Remove

. 11 auic	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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Note:	ve date, if other than the date of filing:
exect in fil	I 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 ed.
Dated	Signature of a member or authorized representative of a member    Anthony   Completed Sk   Typed or printed dame of signee

Filing Fee: \$25.00

ς,