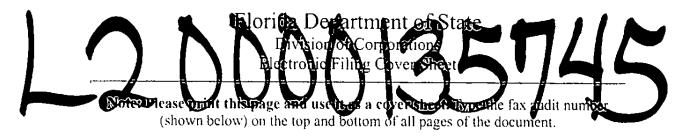
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Account Name : DORCEY LAW FIRM, PLC

Account Number : I20230000134 Phone

: (239)418-0169

Fax Number

: (239)418-0048

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SUBJECT:			nited Liability Compa	ny						
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			Name of Pers	on			-			
	Dorcey Law	Firm								
			Firm/Compar	ny			_			
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ARTICLES OF AMENDMENT
ТО
ARTICLES OF ORGANIZATION
OF

C&A POWER EQUIPMENT, LLC				
(Name of the Limited Liability Comp. (A Florida Limited	nny as it now apr Liability Compan	pears on our records.)		
The Articles of Organization for this Limited Liability Company Florida document number L20000135745	y were filed on	05/19/2020	and assig	gned
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liab	oility company	<u>here</u> :		
The new name must be distinguishable and contain the words "Limited Liab	ility Company," tl	ne designation "LLC" or the a	bbreviation "L.L	.C."
Enter new principal offices address, if applicable:		·		
(Principal office address MUST BE A STREET ADDRESS)			586	200
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			S	2.
Enter new mailing address, if applicable:			25.5	<u>.</u>
(Mailing address MAY BE A POST OFFICE BOX)			<u></u>	AH .
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,			500	9
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on ou	r records, <u>enter the nan</u>	<u>ne of the new</u>	<u>registered</u>
Name of New Registered Agent:				
N P in I Off Add.				
New Registered Office Address:	Enter	Florida street address		
		Florida		
	City		Zip Code	
New Registered Agent's Signature, if changing Registered Agent	<u>:</u>			
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 being filed to merely reflect a change in the registered office company has been notified in writing of this change.	e performance provided for i	of my duties, and I am in Chapter 605, F.S. Or	familiar with , if this docun	and nent is

If Changing Registered Agent. Signature of New Registered Agent

Fram:	Joshua	

From: Joshun . Fax: +12393215034 To: Sunbiz effic account (LLC) Fax: +18506176383 Page: 6 of 7 0610512024 10:05 AM
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O BIDERIUM AUTHORIZED PERSON SHEET OF HIBBRIDGE AND AUTHORIZED BEING B or removed from our records:

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MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Akela Pacitto	8981 ALICO TRADE CENTER ROAD	= Add
		FORT MYERS, FL 33912	
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E. Effective date, if other than the date of filing: (Optional) (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 (
Note: 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.	3)(b) he
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	
Dated	
Clinis Pacitto	
A02005F6040442E . Signature of a member or authorized representative of a member	
Christopher J. Pacitto	

Filing Fee: \$25.00

Typed or printed name of signee

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