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COVER LETTER

TO:

Registration Section

Divis	ion of Cor	porations		
(CARAWAY	ELECTRICAL, LLC		
SUBJECT: _		Name of Lim	ited Liability Company	
The enclosed a	Articles of a	Amendment and fee(s) are sub	mitted for filing.	
Please return a	li correspo	ndence concerning this matter	to the following:	
		KOLTON CARAWAY		
			Name of Person	
		CARAWAY ELECTRICA		
			Firm/Company	
		1801 MINERAL SPRING		<u></u>
			Address	
		JAY, FL 32565	City/State and Zip Code	
			City/State and Zip Code	
		E-mail address: (to be used for future annual report not	itication)
For further inf	ormation co	oncerning this matter, please ca	aH:	
	Name o	r Person	at () Area Code Daytin	ne Telephone Number
Enclosed is a	check for th	ne following amount:		
■ \$25.00 Fil	ling Fee	□ \$30.00 Filing Fee & Certificate of Status	Cl \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Reg	ing Addres istration S sion of C		Street Address: Registration Sc Division of Co	
P.O.	Box 632		The Centre of	•

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Florida document number 1.20000263072	
The Articles of Organization for this Limited Liability Company were filed on 08/25/2020 Florida document number 1.20000263072 This amendment is submitted to amend the following:	and assigned
This amendment is submitted to amend the following:	
<u> </u>	
A. If amending name, enter the new name of the limited hability company here:	
CARAWAY ELECTRICAL & PLUMBING LLC	
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)	2024 DC
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	DCT 31 PN 12: 37
B. If amending the registered agent and/or registered office address on our records, <u>enter agent and/or the new registered office address here</u> :	the name of the new registere
Name of New Registered Agent:	
New Registered Office Address: Enter Florida street address	ss
, FI	lorida

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>	<u>Name</u>	Address	Type of Action
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			□Remove
			□Change
			DAdd
			□Remove
			□Change
			□Remove
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Filing Fee: \$25.00