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COVER LETTER

Registration Section Division of Corporations

Tallahassee, FL 32314

TO:

M&S ELE	CTRIC LLC	•	
SUBJECT:	Name of Lim	ited Liability Company	
	, talle of Ball		
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	endence concerning this matter	to the following:	
	BHOJNARINE MAHAB	IR	
		Name of Person	
	M&S ELECTRIC LLC		
		Firm/Company	
	3221 SW SAVONA BLV	D	
		Address	·····
	PORT ST. LUCIE FL 349	953	
	VINBMAHABIR@GMAI	City/State and Zip Code	
		to be used for future annual report not	ification)
For further information c	oncerning this matter, please c	all:	
BHOJNARINE MAHA	BIR	917 273 8034	
Name o	f Person	at () Area Code Daytin	ne 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		<u>Street Address:</u> Registration Se	ection
Registration Section Division of Corporations		Division of Co	
P.O. Box 6327		The Centre of	•

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

M&S ELECTRIC LLC	12:35 13 FW	1: 14
(Name of the Limited Liability ((A Florida Li	Company as it now appears on our records mited Liability Company)	<u>s.</u>)
he Articles of Organization for this Limited Liability Con lorida document number	npany were filed on	and assigned
is amendment is submitted to amend the following:		
. If amending name, enter the new name of the limited	d liability company here:	
ne new name must be distinguishable and contain the words "Limited	Liability Company," the designation "LLC"	or the abbreviation "L.L.C."
nter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRES	(22	
	,	
nter new mailing address, if applicable:		
failing address MAY BE A POST OFFICE BOX)		
		···
. If amending the registered agent and/or registered ogent and/or the new registered office address here:	ffice address on our records, enter	the name of the new registe
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Flo	rida
	City	гір Сойе

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> MGR	<u>Name</u> BHOJNARINE MAHABIR	Address 2008 10 PH 1: 14	Type of Action
			□Add
			□Remove
		3221 SW SAVONA BLVD PORT ST. LUCIE, FL. 34953	= Change
·			□Add
			□ Remove
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Note:	ive date, if other than the date of filing:
he recor	d 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 led.
	09/14/2020
Dated	
	A way
	Signature of a member or authorized representative of a member

ET CARAC

Typed or printed name of signee