L20000276892

(Day party to May 1)
(Requestor's Name)
(Address)
(Address)
(Address)
<i></i>
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
C C

Office Use Only



800396696788

2330 CLARE DRIVE TALLAHASSEE, FL 32309 (850) 524-5437 (850) 524-6243 PLEASE use funds from ACCT: I20210000160 AMOUNT: \$30.00 Authorization Signature: Janobuch Alvicol Joseph Al Pick up time____ __ Walk in Will wait Mail out Photocopy Certified Copy (s) of Articles of Incorporation ✓ Certificate of Status **AMMENDMENTS NEW FILINGS** ____ Amendment Profit Resignation of R.A. Officer/Director Not for Profit Change of Registered Agent Limited Liability Dissolution/Withdrawal Domestication Merger Other

OTHER FILINGS REGISTRATION/QUALIFICATIONS

Conversion

___Annual Report ____Foreign filing

FLORIDA CAPITAL COURIER SERVICES, INC

Fictitious Name

Limited Partnership
Reinstatement

______Other

Country

EXAMINER'S INITIALS:_____

CORP

COVER LETTER

	gistration Se vision of Cor			
SUBJECT:	INDIAN R	IVER HOME SERVICES LLC	•	
SUBJECT		Name of Lim	nited Liability Company	
The enclose	d Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return	n all correspo	ondence concerning this matter	to the following:	
		INES A. DIAZ		
			Name of Person	
			Firm/Company	
		636 OLD DIXIE HWY		
			Address	
		VERO BEACH, FLORID	A, 32962	
			City/State and Zip Code	
		DIAZELECTRIC.FL@OU		
For further i	nformation c	E-mail address: (oncerning this matter, please c	to be used for future annual report no all:	tification)
INES A. DI.	AZ		772 633-6347	
	Name o	f Person	at () Area Code Daytic	me Telephone Number
Enclosed is	a check for th	ne following amount:		
\$25.00 1	Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Fiting Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	iling Addres		Street Address: Registration S	ection
Registration Section Division of Corporations		Division of Co		
	D. Box 632		The Centre of	Tallahassee
Ta	llahassee, I	FL 32314	2415 N. Monn	oe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED 2022 DEC -9 AH 9: 41

INDIAN RIVER HOME SERVICES LLC

(Name of the Limited Liability Company as it now appears on our records,)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were fil	led on and assigned
Florida document number L20000276892	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability con	mpany here:
DIAZ ELECTRIC LLC	
The new name must be distinguishable and contain the words "Limited Liability Comp	pany," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
-	
B. If amending the registered agent and/or registered office address agent and/or the new registered office address here:	on our records, enter the name of the new registere
Name of New Registered Agent:	
New Registered Office Address:	
New Registered Office Faddless.	Enter Florida street address
	, Florida
City	Zip Code
New Registered Agent's Signature, if changing Registered Agent:	
I hereby accept the appointment as registered agent and agree to accept one of all statutes relative to the proper and complete perform accept the obligations of my position as registered agent as provide being filed to merely reflect a change in the registered office address company has been notified in writing of this change.	mance of my duties, and I am familiar with and ed for in Chapter 605, F.S. Or, if this document is

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>	Name	Address	Type of Action
			□Add
			□Remove
			□Add
		<u> </u>	☐Remove
			□Remove
			
	-		□Add
			□Remove
			□Add
			□Remove
			☐ Change
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ffective date, if other than the data an effective date is listed, the date must be ote: If the date inserted in this block ocument's effective date on the Department.	specific and does not i	id cannoi meet th	e applicat	ole statutor	ng or more they filing req	an 90 days aft	t ional) er filing.) F nis date w	Pursuant to 60 ill not be lis	5.0207 (sed as (
record specifies a delayed effective da	le, but no	t an eff	ective tim	ie, at 12:01	a.m. on th	e carlier of: ((b) The	90th day afte	r the
DECEMBER 9			2	_ ·					
DECEMBER 9	<u> </u>	•							
DECEMBER 9	ature of a	•		_ ·	ntative of a	nember			