## L20000288570

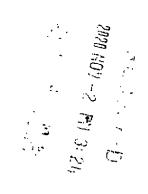
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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Special Instructions to Filing Officer:





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Amend

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## **COYER LETTER**

TO: Registration S Division of Co			*
	ystems Services, LLC	•	
SUBJECT:	Name of Lin	nited Liability Company	<del></del>
The enclosed Articles of	Amendment and fee(s) are sub-	omitted for filing.	
Please return all correspondent	ondence concerning this matter	to the following:	
	Lorin Jorgensen		
		Name of Person	<del></del>
	Standby Systems Services	s, LLC	
		Firm/Company	
	3214 Ashmore St.		
		Address	
	Panama City, FL. 32404		
		City/State and Zip Code	
	standbysystemsservices@g		_
For further information of	E-mail address: ( concerning this matter, please c	to be used for future annual report not all:	ification)
Lorin Jorgensen		850 890-4512	
Name o	f Person	Area Code Daytin	te Telephone Number
Enclosed is a check for t	he 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		Street Address: Registration Se	etion
Registration Section Division of Corporations		Division of Cor	
P.O. Box 632		The Centre of T	allahassee
Tallahassee, l	TL 32314	2415 N. Monro	e Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Standby Systems 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 filed on 14 Sept. 2020 and assigned Florida document number | L20000288570 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LeL.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 on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

## 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.

City

\_. Florida \_\_\_

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>	<u>Address</u>	Type of Action
MGR	Lorin Jorgensen	3214 Ashmore St. Panama City, FL. 32404	■Add
			□Remove
			□Change
AMBR Lorin Jorgensen	Lorin Jorgensen	3214 Ashmore St. Panama City, FL. 32404	≣Adđ
			Remove
			□Change
AMBR	Kathryn Jorgensen	3214 Ashmore St. Panama City, FL. 32404	<b>=</b> Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
		<del></del>	□Add
			□Remove
		<del> </del>	□Change
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			□Change

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<u>Note:</u> III	e date, if other than the date of filing:
f the record s ecord is filed.	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 l.
Dated 80	October 2020
	Lorin Oorgansen
	Lorin Corganism  Signature of a member of authorized representative of a member

•

Filing Fee: \$25.00