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NAME: SOUTHEASTERN INSTALLS, L.L.C.

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#### **COVER LETTER**

SOUTHEASTERN INSTALLS, L.L.C.  Name of Limited Liability Company  The enclosed Articles of Amendment and fee(s) are submitted for filing.  Please return all correspondence concerning this matter to the following:    KERRY ANNE SCHULTZ		Registration Se Division of Cor					
The enclosed Articles of Amendment and fee(s) are submitted for filing.  Please return all correspondence concerning this matter to the following:    KERRY ANNE SCHULTZ	CIID IEC	SOUTHEA	STERN INSTALLS, L.L.C.				
Please return all correspondence concerning this matter to the following:    KERRY ANNE SCHULTZ	SUBJEC	1:	Name of Lim	ited Liability Company			
Please return all correspondence concerning this matter to the following:    KERRY ANNE SCHULTZ	The enclo	sed Articles of	Amendment and fec(s) are sub	mitted for filing.			
Name of Person  SCHULTZ LAW GROUP, P.L.L.C.  Firm/Company  2779 GULF BREEZE PARKWAY  Address  GULF BREEZE, FLORIDA 32563  City/State and Zip Code  KASCHULTZ@SCHULTZLAWGRP.COM  E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:  KERRY ANNE SCHULTZ  Name of Person  Area Code  Daytime Telephone Number  Enclosed is a check for the following amount:  S25.00 Filing Fee  Certificate of Status  Certified Copy (additional copy is enclosed)  Mailing Address:  Registration Section Division of Corporations  Street Address:  Registration Section Division of Corporations				-			
SCHULTZ LAW GROUP, P.L.L.C.  Firm/Company  2779 GULF BREEZE PARKWAY  Address  GULF BREEZE, FLORIDA 32563  City/State and Zip Code  KASCHULTZ@SCHULTZLAWGRP.COM  E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:  KERRY ANNE SCHULTZ  Name of Person  Area Code  Daytime Telephone Number  Enclosed is a check for the following amount:  S255.00 Filing Fee School Filing Fee & Certificate of Status & Certified Copy (additional copy is enclosed)  Mailing Address:  Registration Section Division of Corporations  Street Address:  Registration Section Division of Corporations			KERRY ANNE SCHULT	Z			
Firm/Company  2779 GULF BREEZE PARKWAY  Address  GULF BREEZE, FLORIDA 32563  City/State and Zip Code  KASCHULTZ@SCHULTZLAWGRP.COM  E-mail address: (to be used for future annual report notification.)  For further information concerning this matter, please call:  KERRY ANNE SCHULTZ  Name of Person  Area Code  Total Tot			Name of Person				
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City/State and Zip Code  KASCHULTZ@SCHULTZLAWGRP.COM  E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:  KERRY ANNE SCHULTZ  S50  Area Code  Daytime Telephone Number  Finclosed is a check for the following amount:  S25.00 Filing Fee  Certificate of Status  Certified Copy (additional copy is enclosed)  Mailing Address:  Registration Section Division of Corporations  Street Address:  Registration Section Division of Corporations			· · · · · · · · · · · · · · · · · · ·	Address			
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Name of Person  Name of Person				•	fication)		
Name of Person  Area Code  Daytime Telephone Number  Enclosed is a check for the following amount:  S25.00 Filing Fee  Certificate of Status  Certified Copy (additional copy is enclosed)  Certified Copy (additional copy is enclosed)  Mailing Address:  Registration Section Division of Corporations  Area Code  Daytime Telephone Number  Daytime Telephone Number  S60.00 Filing Fee, Certified Copy (additional copy is enclosed)  Street Address: Registration Section Division of Corporations	For furthe	r information c	oncerning this matter, please ca	all:			
Area Code Daytime Telephone Number  Enclosed is a check for the following amount:  S25.00 Filing Fee S30.00 Filing Fee & S60.00 Filing Fee, Certificate of Status Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed)  Mailing Address: Registration Section Division of Corporations  Area Code Daytime Telephone Number  S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)  Street Address: Registration Section Division of Corporations	KERRY.	ANNE SCHUL	TZ				
S25.00 Filing Fee S30.00 Filing Fee & S60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed)  Mailing Address: Registration Section Division of Corporations  S55.00 Filing Fee & S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)  Street Address: Registration Section Division of Corporations		Name o	f Person	Area Code Daytim	e Telephone Number		
Certificate of Status  Certified Copy (additional copy is enclosed)  Certificate of Status & Certified Copy (additional copy is enclosed)  Mailing Address: Registration Section Division of Corporations  Certificate of Status & Certified Copy (additional copy is enclosed)  Street Address: Registration Section Division of Corporations	Enclosed	is a check for th	ne following amount:				
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Division of Corporations Division of Corporations					ction		
P.O. Boy 6327 The Centre of Tallaharras	Division of Corporations						
Tallahassee FL 32314 2415 N. Monroe Street Suite 810		P.O. Box 632					

Tallahassee, FL 32303

#### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SOUTHEASTERN INSTALLS I. L.C.

company has been notified in writing of this change.

(Name of the Limited Liability Comp. (A Florida Limited	any as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number <u>L20000351988</u> .	were filed on 11/16/2020	_ and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	oility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	ility Company," the designation "LLC" or the abbre	viation "L.L.C."
Enter new principal offices address, if applicable:	3455 DR. MARTIN LUTHER KING DR.	<u> </u>
(Principal office address MUST BE A STREET ADDRESS)	PENSACOLA, FLORIDA 32503	
		73 ·
		-5
Enter new mailing address, if applicable:	3455 DR. MARTIN LUTHER KING DR.	- 2 
(Mailing address MAY BE A POST OFFICE BOX)	PENSACOLA, FLORIDA 32503	<u>+</u>
Craiming address PM11 BD711 OG1 Of FIELD BOX		
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:  Name of New Registered Agent:  New Registered Office Address:		of the new registere
	Enter Florida street address	
	, Florida	Zip Code
New Registered Agent's Signature, if changing Registered Agent:	•	zap Code
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	performance of my duties, and I am fam	illiar with and

being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability

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

Title	<u>Name</u>	Address	Type of Action
MBR	Christopher Scott Snowden	3455 DR. MARTIN LUTHER KING DR.	<b>=</b> Add
		PENSACOLA, FLORIDA 32503	□Remove
			Change
MBR	Stacy Marie Snowden	3455 DR. MARTIN LUTHER KING DR.	<b>≣</b> Add
		PENSACOLA, FLORIDA 32503	□Remove
			🗆 Change
MGR	CHARLES H. TONER, JR	2945 BAY STREET	□Add
		GULF BREEZE, FLORIDA 32563	Remove
			Change
MBR	Charles H. Toner & Valerie Toner	2945 BAY STREET	□Add
		GULF BREEZE, FLORIDA 32563	■Remove
			□Change
			🗆 Add
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If an offect <u>Note:</u> I	e date, if other than the date of filing:  (optional)  tive 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 the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed it's effective date on the Department of State's records.	i.0207 ed as
e record rd is file	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after it.	r the
Dated <u>/</u>	Ver 20 1, 2023.	
••	[[[]]]	
(	Signature of a member or authorized representative of a member	

Filing Fee: \$25.00