L21000000497

(Requestor's Name)
(Address)
(Address)
(Address)
(City/State/Zip/Phone #)
☐ PICK-UP ☐ WAIT ☐ MAIL
(Business Entity Name)
(Document Number)
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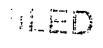
O SIMMONS JAN 1 2 2021

Sunshine State Corporate Compliance Company

3458 Lakeshore Drive, Tallahassee, Florida 32312 (850) 656-4724

DATE 01/11/2021			**WAL	K <i>[N#</i>
ENTITY NAME LIT ELI	ECTRICAL SERVICES, LL	С		
DOCUMENT NUMBER_	L21000000497			
	PLEASE FILE THE ATTA	ACHED AND RETUR	W	
XXXX	Plain Copy			
	Certified Copy			
	Certificate of Status			
#	CEASE OBTAIN THE FOLLOWING		E ENTITY	
	Certificate of Good Standing **APOSTILLE' / NOTARI	IAL CERTIFICATIO	ON**	
COUNTRY OF DESTINATI	ON			
NUMBER OF CERTIFICAT	TES REQUESTED			
TOTAL OWED \$25.00			: 120160000072	
Please call Tina at th	e above number for any iss		_	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



2021 JAH 11 AM 9:51

Lit Electrical Services LLC	STERLING TAFF
(Name of the Limited Liability Company as (A Florida Limited Liabil	it now appears on our records.)
The Articles of Organization for this Limited Liability Company wer Florida document number L21000000497	e filed on 12-21-2020 and assigned
Torica document number	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability	company here:
Lit Electric Services LLC	
The new name must be distinguishable and contain the words "Limited Liability C	ompany," 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 registered agent and/or the new registered office address here:	address on our records, enter the name of the new
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

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

MGR = Manager AMBR = Authorized Member		Sour France Comp			
Title	<u>Name</u>	Address	2021 JAN 11 AM 9:51	Type of Action	
			TALLAS WEE, FL	Add	
				□ Remove	
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__ Change

	Trans Sample State of
	2021 JAN 11 AM 9: 51
	SUBSTITUTE OF STREET
	Tank Land Care E

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ective date, if other than the effective date is listed, the date muster. If the date inserted in this blument's effective date on the D	at be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.020 ook does not meet the applicable statutory filing requirements, this date will not be listed as
record specifies a delayed he 90th day after the rec	I effective date, but not an effective time, at 12:01 a.m. on the earlier o ord is filed.
ed	2021
ISI Phatt William	

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