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COVER LETTER

TO:

Tallahassee, FL 32314

TO: Registration Se Division of Cor			
CLOS OF AREA	ELECTRIC LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	emitted for filing.	
	ondence concerning this matter	-	
	VENUS JEAN PIERRE		
		Name of Person	
	DJOUVIE LLC		
		Firm/Company	
	2328 IOTH AVE N STE	501K	
		Address	
	LAKE WORTH, FL 3346	1	
	.	City/State and Zip Code	
	ATLASRESOURCECONS E-mail address: (ULTING@GMAIL.COM to be used for future annual report noti	fication)
For further information c	oncerning this matter, please c	·	
OBED SAGET		954 608-9728 at ()	
Name o	f Person	Area Code Daytim	e Telephone Number
Enclosed is a check for the	ne following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ S60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addres Registration S		Street Address: Registration Se	ction
Division of C	Corporations	Division of Cor	porations
P.O. Box 632	.7	The Centre of T	l'allahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

DJOUVIE ELECTRIC LLC		
(<u>Name of the Limited Liability C</u> (A Florida Lin	ompany as it now appears on our records. iited Liability Company))
The Articles of Organization for this Limited Liability Comp	pany were filed on 05/06/2021	and assigned
Florida document number L21000211405		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	liability company here:	
D'JOOVE ELECTRIC LLC		
he new name must be distinguishable and contain the words "Limited	Liability Company," the designation "LLC"	or the abbreviation "L.1C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRES.	<u></u>	
	-	2023 15
		50 5 71
Enter new mailing address, if applicable:		PR T
•		>>1 0 I
Mailing address MAY BE A POST OFFICE BOX)		
If an and ing the unictured agent and/on unictional of	e	
3. If amending the registered agent and/or registered of igent and/or the new registered office address here:	nce address on our records, enter the	ne name on the new registe
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	Line) F 101 uu sireet address	
	Flor	
	Cirv	Zip Code

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 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>	Address	Type of Action
<u>.</u>			🗆 🖂 Add
			□Remove
			□Change
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fective date, if other than the effective date is listed, the date in this cument's effective date on the	ust be specific and block does not m	cannot be prior to teet the applical	date of filing or mo	(option of the control of the contro	filing.) Pursuant to 605.0)207 I as
ecord specifies a delayed effect is filed.	ive date, but not	an effective tim	ie, at 12:01 a.m. o	n the earlier of: (b') The 90th day after t	the
		2023				
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ned APRIL 2ND	Signature of a n	Plure	- •			

Filing Fee: \$25.00