## 121000269785

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

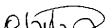




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## **COVER LETTER**

TO:

Registration Section
Division of Corporations

PRIME EL SUBJECT:	ECTRICAL COMPANIES LI	.C	
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspondence	ondence concerning this matter	to the following:	
	LOVETTE DOBSON		
		Name of Person	
	INCFILE.COM LLC		
		Firm/Company	
	17350 STATE HWY 249	STE 220	
		Address	···
	HOUSTON, TX 77064		
		City/State and Zip Code	
	EFILE1234@INCFILE.CO	M	
	E-mail address: (	to be used for future annual report not	ification)
For further information of	oncerning this matter, please c	all:	
LOVETTE DOBSON		888 462-3453	
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)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addres Registration S Division of C P.O. Box 632 Tallahassee, I	Section orporations 7	Street Address: Registration Second Division of Coron The Centre of Tallahassee, FL	porations Tallahassee e Street, Suite 810

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	TRICAL COMPANIES ELC	
(Name of the Limited Liabi (A Florid	lity Company as it now appears on our records.) da Limited Liability Company)	
The Articles of Organization for this Limited Liability of Iorida document number L21000269785	Company were filed on 06/10/2021	and assigned
his amendment is submitted to amend the following:		
If amending name, enter the new name of the lin	nited liability company here:	
he new name must be distinguishable and contain the words "Li	mited Liability Company," the designation "LLC" or	the abbreviation "L.L.C."
nter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADD	RESS)	
Inter new mailing address, if applicable:  Mailing address MAY BE A POST OFFICE BOX)		
	<u></u>	212
If amending the registered agent and/or registere gent and/or the new registered office address here:	ed office address on our records, enter the	2
Name of New Registered Agent:		- 1 PH 5
New Registered Office Address:	Enter Florida street address	<u> </u>
	, Florid	
<del></del>	City	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
AMBR	Jean L Beebe	3901 Nw 79th Ave, Ste 245 #4275	■Add
		Miami, FL 33166	□Remove
			□Add
			□Remove
	····		
			Remove
			□ Add
			□Remove
			Change
			Remove
			Change
			🗀 Add
			□ Remove
			□ Change

	<del></del>		
CAN APPARATURE			
<del></del>			
	<del></del>		
-		<del></del>	
	<del> </del>		
Note: If the date inserted in this b	ust be specific and cannot be prior block does not meet the applic Department of State's records.	to date of filing or more than 90 days cable statutory filing requirements	after filing.) Pursuant to 605.0207; this date will not be listed as
document's effective date on the i			
e record specifies a delayed effecti	ve date, but not an effective ti	ime, at 12:01 a.m. on the earlier of	of: (b) The 90th day after the
e record specifies a delayed effecti rd is filed.	ve date, but not an effective ti	ime, at 12:01 a.m. on the earlier o	of: (b) The 90th day after the
e record specifies a delayed effective date on the first specifies and delayed effective distribution.  Dated July 30	A (2)	ime, at 12:01 a.m. on the earlier of	