## L21000391570

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## **COVER LETTER**

TO:		istration Se ision of Cor		¹ <b>&amp;</b>	•	
Bryan McMath Electrical Services						
SUBJE	C1:		Name of Lin	ited Liability Company	<del></del>	
The enc	losed	l Articles of a	Amendment and fec(s) are sub	mitted for filing.		
Please r	eturn	all correspon	ndence concerning this matter	to the following:		
			Belinda McMath			
				Name of Person		
			Bryan McMath Electrical	Services LLC		
				Firm/Company		
			6051 Dome Level Rd			
				Address	<del></del>	
			Tallahassee, FL 32304			
				City/State and Zip Code		- 7
			The5bs93@gmail.com			· · ·
				o be used for future annual report	notification)	٠,٠
For furt	her ir	iformation co	oncerning this matter, please c	ill:		<i>-</i>
Belinda	McN	Aath		850 519-5010	ı	ر بر م
		Name of	Person	Area Code Day	time Telephone Number	
Enclose	d is a	check for th	e following amount:			
\$25	.00 F	iling Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing For Certificate of Signature Copy (additional copy is	Status &
		ling Address		<u>Street Address</u> Registration		
Registration Section Division of Corporations				Division of C		
	P.C	). Box 632	7	The Centre o	f Tallahassee	
	Tal	lahassee, F	FL 32314	2415 N. Mor	roe Street, Suite 810	

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Bryan McMath Electrical Services LLC				
( <u>Name of the Limited Liabilit</u> (A Florida	y Company as it now appears on a Limited Liability Company)	ur records.)		
(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 09/01/2021 and as Florida document number 121000391570  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 "Letter 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 neagent and/or the new registered office address here:  Name of New Registered Agent:  New Registered Office Address:  Enter Florida street address  Enter Florida attreet address  Florida  Zip Code  New Registered Agent's Signature, if changing Registered Agent:	21 and assigned			
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limit	ted liability company here:			
The new name must be distinguishable and contain the words "Limi	ited Liability Company," the designa	tion "LLC" or the abbreviation "L.L.C."		
Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET ADDR	ESS)	<del>-3</del>		
		<del></del>		
(Staning address SIAT BE A POST OFFICE BOX)	<del></del>	့ လွ		
		72		
	office address on our record	s, enter the name of the new registere		
Name of New Registered Agent:				
Nam Dagistarad Office Address				
New Neglstered Office Address.	Enter Florida str	eet address		
	. Florida			
	City	Zip Code		
New Registered Agent's Signature, if changing Registered	l Agent:			
I hereby accept the appointment as registered agent a provisions of all statutes relative to the proper and co accept the obligations of my position as registered ag being filed to merely reflect a change in the registered company has been notified in writing of this change.	omplete performance of my d ent as provided for in Chapt	uties, and I am familiar with and er 605, F.S. Or, if this document is		

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

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	Jeff Grantham 6010 Dome Level Rd Tallahassee FL 32		■Add
			□Remove
			□Change
			□Add
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			· .					~
ffective date, i	f other than the distinct listed, the date must be	ate of filing:	annot be prior t	o date of tiling	or more than 90 day	(optional) es after filing APu	rsuant to 605 0	)20°
<u>lote:</u> If the date	inserted in this bloc tive date on the Dep	k does not me	et the applica	ble statutory f	iling requiremen	ts, this date wil	l not be listed	d as
ocument's chec	ave date on the 17cf	arment of Sta	ne s records.					
record specifies I is filed.	a delayed effective	date, but not a	n effective un	ne, at 12:01 a.	m. on the earlier	of: (b) The 90	)th day after t	the
July 17	O		2023	4. ~ 18	$\sim$			
Pated July 17		•	1///	/	, \ l			

Filing Fee: \$25.00

Typed or printed name of signee