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| (Requestor's Name) |
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| PICK-UP WAIT MAIL |
| |
| (Business Entity Name) |
| |
| (Document Number) |
| |
| Certified Copies Certificates of Status |
| |
| Special Instructions to Filing Officer: |
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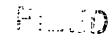
- 2/22/2023

COVER LETTER

| TO: Registration Security Division of Corp | porations | | | | | | | |
|--|--|---|---|--|--|--|--|--|
| SUBJECT: | Danny's | E3 Electric ted Liability Company | Professionals LLC | | | | | |
| SUBJECT: | Name of Limi | ted Liability Company | | | | | | |
| | | | | | | | | |
| The enclosed Articles of . | Amendment and fee(s) are sub | mitted for filing. | | | | | | |
| Please return all correspo | ndence concerning this matter | to the following: | | | | | | |
| | Din | e / Estrada | | | | | | |
| | | | | | | | | |
| | Duny's | Electric Prefession | iial) LLC | | | | | |
| | | Firm/Company | | | | | | |
| | 2316 Acad | lerry Cir W APT-3 | 02 | | | | | |
| | | / Address | | | | | | |
| | Kissinmi | nec F1 34744 City/State and Zip Code | | | | | | |
| | | | | | | | | |
| | estradades: | to be used for Educe annual report not | ification) | | | | | |
| For further information c | oncerning this matter, please ca | | | | | | | |
| Daniel E | strado | at (<u>787</u>) 410 Area Code Daytin | - 3939 | | | | | |
| Name o | of Person | Area Code Daytin | ne Telephone Number | | | | | |
| Enclosed is a check for the | he following amount: | | | | | | | |
| □ \$25.00 Filing Fee | ✓ \$30.00 Fiting 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 Addre | | Street Address: Registration Se | ection | | | | | |
| Registration Division of C | | - | Registration Section Division of Corporations | | | | | |
| P.O. Box 632 | 27 | The Centre of | | | | | | |
| Tallahassee, | FL 32314 | 2415 N. Monroe Street, Suite 810 | | | | | | |

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



| | | • | | | 2023 FEB | -22 | AH 10: 22 | |
|---|------------------------------|---------------------------------------|----------------|---------------|---|----------|----------------|---|
| Danny's E | Tectric | Professi | onuls l | LLC | <u>s (</u> | | * | |
| Name of the Limited Liabi | lity Compan da Limited Li | y as it now appo- lability Company | ears on our i | records.) | TALLA | inas | 3.41E LE.FL | |
| | | | | | | | | |
| The Articles of Organization for this Limited Liability | Company v | were filed on _ | 07/2 | // | - | and as: | signea | |
| Florida document number <u>L12000204897</u> | · | | | | | | | |
| This amendment is submitted to amend the following: | | | | | | | | |
| A. If amending name, enter the new name of the lin | nited l <u>iabi</u> ! | lity company | here: | | | | | |
| Danny's Professional Solutions The new name must be distinguishable and contain the words "Li | LLC | | | | | | | |
| The new name must be distinguishable and contain the words "Li | mited Liabili | ty Company," th | e designation | ı "LLC" o | r the abbrevi | ation "L | L.C." | |
| Enter new principal offices address, if applicable: | | | | | | | | |
| (Principal office address MUST BE A STREET ADE | <u>)RESS)</u> | | · | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| Enter new mailing address, if applicable: | | | | | | | - | |
| (Mailing address MAY BE A POST OFFICE BOX) | | · | | | | | | |
| | | | | | | | | |
| | | | | | | | • . | |
| B. If amending the registered agent and/or register agent and/or the new registered office address here | ed office a | ddress on ou | r records, | enter th | <u>e name ot</u> | the ne | w registere | 1 |
| agent and/or the new registered office address neve | <i>,</i> • | | | | | | | |
| Name of New Registered Agent: | | | | | | | | |
| Name of New Registered Agent. | | | | _ | - | | | |
| New Registered Office Address: | | Futer | Florida street | address | | | | |
| | | i.mer | | | | | | |
| | | City | | , Flori | ida | Zin Code | , | |
| | | City | | | • | | | |

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 Type of Action **Address** Title Name _____ □Add _____ □Remove _____ □Change _____ □Remove _____ □Remove □ Change _____ □Add Remove □ Remove Change _____ 🗀 Add _____ □Change _____ □Add _____ □Remove

□ Change

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| Note: | five date, if other than the date of filing: |
| ne reco ord is f | rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the iled. |
| Dated | 2/22/23 Sommittee |
| | Signature of a member or authorized representative of a member |
| | 3.6 |

Filing Fee: \$25.00