

h22 000243815

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

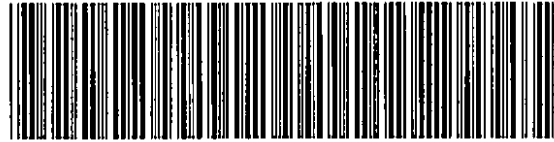
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FILED
2022 SEP 20 PM 3:16
TALLAHASSEE, FL
OFFICE OF THE
CLERK OF THE
SUPREME COURT

A. BUTLER
SEP 26 2022

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: ENERGY ELECTRIC STAFFING LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

ARIEL AGUIRRE MONTOYA

Name of Person

ENERGY ELECTRIC STAFFING LLC

Firm/Company

45 OCEAN ST

Address

RIVIERA BEACH, FL 33404

City/State and Zip Code

CLMULTISERVICE1@GMAIL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ARIEL AGUIRRE MONTOYA

561

932-55-91

at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the 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 Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

FILED

Emergency Water Damage Recovery LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

2022 SEP 20 PM 3:16

SECRETARY OF STATE
TALLAHASSEE and assigned

The Articles of Organization for this Limited Liability Company were filed on

6/28/2022

Florida document number L21000296637

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 "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 address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

Ateret Bohbot

New Registered Office Address:

10472 Oak Meadow Lane

Enter Florida street address

Lake Worth

City

Florida

33449

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 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

Title	Name	Address	Type of Action
MGR	Shani Bohbot	10472 oak Meadow Ln	<input type="checkbox"/> Add
		Lake Worth FL 33449	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Ateret Bohbot	10472 oak Meadow Ln	<input checked="" type="checkbox"/> Add
		Lake Worth FL 33449	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Ateret Bohbot	10472 oak Meadow Ln	<input checked="" type="checkbox"/> Add
		Lake Worth FL 33449	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Shani Bohbot	10472 oak Meadow Ln	<input type="checkbox"/> Add
		Lake Worth FL 33449	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

I, Shani Bohbot, am giving ownership of the LLC to Ateret Bohbot.

E. Effective date, if other than the date of filing: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record 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 record is filed.

Dated September 16th, 2022.

Shani Bohbot

Signature of a member or authorized representative of a member

Shani Bohbot

Typed or printed name of signee



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 12, 2022

ATERET BOHBOT
10472 OAK MEADOW LANE
LAKE WORTH, FL 33449

SUBJECT: EMERGENCY WATER DAMAGE RECOVERY LLC
Ref. Number: L21000296637

We have received your document for EMERGENCY WATER DAMAGE RECOVERY LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Anissa Butler
Regulatory Specialist II

Letter Number: 522A00020235

SEP 20 2022