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(Business Entity Name)
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A. BUTLER
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COVER LETTER

Division of Cor	porations	المحق	
: Alef Electro	o & Handyman Services LLC		
SUBJECT:			
	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Dani Elizabeth Vargas		
		Name of Person	
	Alef Electro & Handyman	Services LLC	
		Firm/Company	
	2787 Ohio Street		
		Address	
	West Palm Beach, FL 3340	06	
	dra.danielizabeth@gmail.co	City/State and Zip Code on	
	E-mail address: (to be used for future annual report notit	ication)
For further information c	oncerning this matter, please co	all:	
Dani Elizabeth Vargas D	iaz	787 932-4148	
Name o	(Person	at () Area Code Daytime	2 Telephone Number
Enclosed is a check for the	he 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)'s enclosed)

TO:

Registration Section

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**

Alef Electro & Handyman Services LLC

(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 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Alef Electro Services LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 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: Dani Elizabeth Vargas Name of New Registered Agent: 2787 Ohio Street New Registered Office Address: Enter Florida street address _____, Florida 33406 Zio Code West Palm Beach

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.

City

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>	<u>Address</u>	Type of Action
			□Remove
		<u></u>	□Change
			□ Add
			□Remove
			□Change
			□Remove
			□Remove
			□Change
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			□Change

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ffective date, if other than the an effective date is listed, the date must ote: If the date inserted in this blocument's effective date on the D	it be specific and cannot be prior to da ock does not meet the applicable	te of filing or more than 90 days	optional) safter filing.) Pursuant to 605.0207 s, this date will not be listed as
record specifies a delayed effective is filed.	e date, but not an effective time, a	at 12:01 a.m. on the earlier o	of: (b) The 90th day after the
August 1	2022		
nted			
ated	Signature of a member or authorized	la Siax	