L22000437551

(Re	questor's Name)	
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2023 AUG 25 PM L:

COVER LETTER

TO:

Registration Section
Division of Corporations

SUBJECT: KEE	EGAN ELECTRI Name of Limi	C LLC 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:		
	Francis	5 G. Keega Name of Person	n Jr.	
	<u>Keegan</u> E	lectric LLC	<u> </u>	
		el Prado Blvd		
	<u>Cape Co</u> kkeegan@	oral FL 339 City/State and Zip Code OKERGAN SARVICE	204 25.com ≥5	2023 ;
For further information c	E-mail address: (oncerning this matter, please ca	City/State and Zip Code City/State and Zip Code City/State and Zi	otification)	AUG 25
Francis Name o	Keegan f Person	at ()25	5-9985 mmc Telephone Number	PK 4: 26
Enclosed is a check for the	he following amount:			
\$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing For Certificate of \$ Certified Copy (additional copy is	Status &
Mailing Address Registration S Division of C	Section Corporations	Street Address: Registration S Division of C The Centre of	orporations	
P.O. Box 632 Tallahassee,			roe Street, Suite 810	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Keegan Electr	ic LLC				
(Name of the Limited Liability Compa (A Florida Limited	iny as it now appears on Liability Company)	our records.)			
The Articles of Organization for this Limited Liability Company Florida document number <u>L22000437551</u> .	were filed on (C	111/2022	_ and assigned		
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limited liab	oility company here:				
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the design	nation "LLC" or the abbre	viation "L.L.C."		
Enter new principal offices address, if applicable:			2023		
(Principal office address MUST BE A STREET ADDRESS)		ALC:	A TT		
		AHASS	5 2 5 P		
Enter new mailing address, if applicable:		्राम्यः स्पर्			
(Mailing address MAY BE A POST OFFICE BOX)		A T	. 26		
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our reco	rds, <u>enter the name c</u>	of the new register		
Name of New Registered Agent:					
New Registered Office Address:	Enton Charida	etrant addrave	<u> </u>		
	Enter Florida street address				
	City	Florida	Zip Code		
New Registered Agent's Signature, if changing Registered Agent:	·		•		
I hereby accept the appointment as registered agent and agr		acity I further agree	e to comply with th		
provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as	e performance of my	duties, and I am fan	ullar with and		

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 = Ma $AMBR = Au$	anager ithorized Member		
<u>Title</u>	Name	Address	Type of Action
MGR	Brandon M. Keegan	5237 Del Prado Bluds	🗀 Add
	_	5237 Del Prado Bluds Cape Coral FL 33904	Remove
			Change
AR	Kristin Keegan	5237 Del Prado Bluds	
		5237 Del Prado Bluds Cape Coral, FL33	90 Kemove
			Change
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ote: If the date inserted in this block ocument's effective date on the Depar				ble statut	ory filing	requiremer	its, this da	te wi	ill not	be listed :
record specifies a delayed effective da	te, but not a	an effe	ective tir	ne, at 12:	01 a.m. or	the earlier	of: (b)	The S	90th da	y after th
is med.										
ned August 20	2.	4	202	3.						
7				<u>-</u>						