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Y. SCOTT MAY 1 5 2023

COVER LETTER

TO: Registration So Division of Cor		*	•
SUBJECT: Do		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:	
	Ry	Name of Person	2023 HAR 28
	<u> Javis</u>	Flectric Servius	
	105 pc	int of woods T	PM 3: 23
	Palatka	FL 32177 City/State and Zip Code	
	Yand @ E-mail address: (1	davis electric Serve to be used for future annual report notif	rices.com
For further information of	concerning this matter, please ca	all:	
Ryan	Sov 5	at (386) 972-	- 35 92 Telephone Number
Enclosed is a check for t	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 is enclosed)
Mailing Address Registration of C	Section Corporations	Street Address: Registration Sec Division of Corp	porations
P.O. Box 632	41	The Centre of T	ananassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Compan (A Florida Limited Liability Compan	v as it now appears on our records.) ability Company)
The Articles of Organization for this Limited Liability Company v Florida document number <u>123000046289</u> .	were filed on 25 Jan. 2023 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabil	
Enter new principal offices address, if applicable:	N/A
(Principal office address MUST BE A STREET ADDRESS)	2023
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A 28 PM
B. If amending the registered agent and/or registered office ac agent and/or the new registered office address here:	ldress on our records, <u>enter the name of the new registered</u>
Name of New Registered Agent: N/A	
New Registered Office Address: New Registered Office Address:	Enter Florida street address
New Registered Agent's Signature, if changing Registered Agent:	City Zip Code
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete p	

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

<u>Title</u>	<u>Name</u>	Address	Type of Action
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		105 point of Woods Trl Palatka, FL 32177	□Remove
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is filed.	reffective date, but f	досан епесиче п	me, at 12.01 a.m	on the earner of	. (b) The	out day at	nei un
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ated 24 March	<u>12023 </u>	_,					
	L	2					
	1//	Fa member or author					
	Signature	a member or author	orized representative	e of a member			

Filing Fee: \$25.00