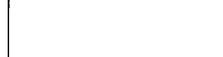
## L23000203980

Office Use Only





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## **COVER LETTER**

TO:

Registration Section

Tallahassee, FL 32314

Divis	sion of Corp	porations :			
cun irot.		ectric Supply LLC			
SUBJECT:			ited Liability Company		
The enclosed	Articles of a	Amendment and fee(s) are sub	mitted for filing.		
Please return	all correspo	ndence concerning this matter	to the following:		
		Ahmed Chavez Ojeda			
			Name of Person		
		,	Firm/Company		
		2530 NW 108th ST			
			Address		
		Miami,FL, 33167			હ્યુ
		alme5@yahoo.com	City/State and Zip Code		:
			to be used for future annual report notifi	cation)	;
For further in:	formation co	oncerning this matter, please ca	all:		 
Ahmed Chavez Ojeda		786 8732119 at ()			
	Name of	f Person	Area Code Daytime	Telephone Number	·
Enclosed is a	check for th	ne following amount:			
<b>≡</b> \$25.00 Fi	iling Fee	□ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified (	of Status &
	ing Addres		Street Address:	•!	
_	istration S ision of C	orporations	Registration Sec Division of Corp		
	Box 632		The Centre of To		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Compact Electric Supply LLC		
(Name of the Limited (A	Liability Company as it now appears on our records.) Florida Limited Liability Company)	
The Articles of Organization for this Limited Liab	oility Company were filed on 04/25/2023	and assigned
Florida document number L23000203980		
This amendment is submitted to amend the follow	ring:	
A. If amending name, enter the new name of the	he limited liability company here:	
he new name must be distinguishable and contain the word	ds "Limited Liability Company," the designation "LLC" or t	he abbreviation "L.L.C."
Enter new principal offices address, if applicab	ele:	
Principal office address MUST BE A STREET.	ADDRESS)	
	<del></del>	
Enter new mailing address, if applicable:		
<u>Mailing address MAY BE A POST OFFICE BO</u>	<u> </u>	
		5.8
3. If amending the registered agent and/or reg	istered office address on our records, enter the	name of the new register
gent and/or the new registered office address		
Name of New Registered Agent:		
		,
New Registered Office Address:	Enter Florida street address	<del></del>
	CARCOT IN THE STORE ESS	
	Florid:	
	City	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	<u>Name</u>	Address	Type of Action
AMBR	Bernardo Gonzalez Ortigosa	1405 SW 70th Ave	
		Miami, FL.33144	■Remove
			Change
			🗖 Add
			□Remove
			□Change
			□Add
			□ Remove
			□Change
			□Add
			Remove
			□Add
			Remove
			□Change
			□Remove
			□ Changa

Dated	Signature of a member or authorized representative of a member		
he recor ord is fil		The 90th d	lay after the
(If an eff Note:	ve date, if other than the date of filing:  (option retive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after fill the date inserted in this block does not meet the applicable statutory filing requirements, this dent's effective date on the Department of State's records.	ing.) Pursuar	nt to 605.0207 ( t be listed as t
E Const	us data if athough and the date of filings		.' 1 4
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Filing Fee: \$25.00