

L23000370437

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

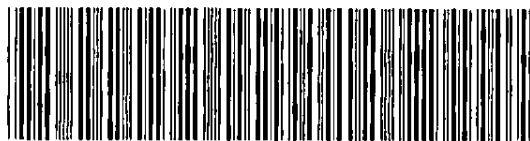
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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LLC Amend

XF

10/02/23--01006--001 \*\*35.00

AUG 17 2023

2023 SEP 29 PM 12:55

FILED

A. RAMSEY

OCT 2 2023

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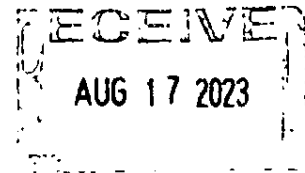
## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** ELC WELDING & MECHANIC SERVICES 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:



ANISLEY MAHARAJ

Name of Person

ELEKT LIF FINANCIAL

Firm/Company

22997 ASPECT DRIVE APT 206

Address

BOCA RATON, FL 33428

City/State and Zip Code

INFO@ELEKTLIF.COM

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

For further information concerning this matter, please call:

ANISLEY MAHARAJ

305

394-0527

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

August 23, 2023

ANISLEY MAHARAJ  
ELEKT LIF FINANCIAL  
22997 ASPECT DRIVE APT 206  
BOCA RATON, FL 33428

SUBJECT: ELC WELDING & MECHANIC SERVICES LLC  
Ref. Number: L23000370437

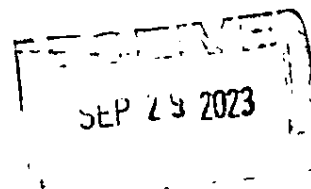
We have received your document for ELC WELDING & MECHANIC SERVICES LLC, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$30.00.

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.

Annette Ramsey  
OPS

Letter Number: 123A00019617



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

ELC WELDING & MECHANIC SERVICES LLC

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

(A Florida Limited Liability Company)

FILED  
2023 SEP 29 PM 12:55 '9

The Articles of Organization for this Limited Liability Company were filed on 08/07/2023 and assigned  
Florida document number L23000370437.

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:

New Registered Office Address:

*Enter Florida street address*

Florida

*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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	CONCEPCION PINA, EUTIMIO	401 NW 201 ST MIAMI, FL 33055	<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
MGR	CONCEPCION CESPEDES, LEONARDO	401 NW 201 ST MIAMI, FL 33055	<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

[illegible]

(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)

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.

Amaharaj  
Signature of a member or authorized representative of a member

Typed or printed name of signee