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## **COVER LETTER**

	gistration Sec ision of Corp					
OLID HEAT	E&C L.CHARLES LLC  Name of Limited Liability Company					
SUBJECT:						
The enclosed	I Articles of A	mendment and fee(s) are sub-	mitted for filing.			
Please return	all correspon	dence concerning this matter	to the following:			
		VICTOR REYES HERNA	NDEZ			
	Name of Person					
		VD TAX, LLC				
	Firm/Company					
	3204 FRENCH AVE					
	Address					
	LAKE WORTH, FL 33461					
	City/State and Zip Code VREYES@VDTAXUS.COM					
			to be used for future annual report noti	fication)		
For further i	nformation co	neerning this matter, please co	all:			
VICTOR REYES HERNANDEZ			561 612-9665			
	Name of	Person	at () Area Code Daytim	e Telephone Number		
Enclosed is	i check for the	following amount:				
□ \$25.00 I	Filing Fee	S30.00 Filing Fee & Certificate of Status	S55.00 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

Street Address: Registration Section Division of Corporations The Centre of Tallahassee

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

E&C L.CHARLES LLC		
( <u>Name of the Limited Liability Com</u> (A Florida Limite	pany as it now appears on our reco d Liability Company)	rds.)
The Articles of Organization for this Limited Liability Compar	ny were filed on 10/02/2023	and assigned
Florida document number 1.23000455754		
his amendment is submitted to amend the following:		
. If amending name, enter the new name of the limited lia	ability company here:	
E&C LCHARLES LLC		
he new name must be distinguishable and contain the words "Limited Lia	bility Company," the designation "LI	.C" or the abbreviation "L.L.C."
nter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS)		2
		124
		E 1.
nter new mailing address, if applicable:		3 -2 F
•	- <del></del>	V:
Mailing address MAY BE A POST OFFICE BOX)		<b>35</b> (*)
		΄ 💢 ω
If amending the registered agent and/or registered office gent and/or the new registered office address here:	e address on our records, <u>ent</u>	er the name of the new regist
the men registered office address neve.		
Name of New Registered Agent:	·	• • • •
New Registered Office Address:		
	Enter Florida street addi	ress
	, , ,	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>	Address	Type of Action
	<del></del>		□Add
			□Remove
			☐ Change
		<del>-</del>	□Add
			□Remove
			□Change
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			Remove
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) 01/01/2024 E. Effective date, if other than the date of filing: ` (optional) (If an effective date is listed, the date must be specific and cannot be prior to date of filling or more than 90 days after filling.) Pursuant to 605,0207 (3)(b) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. 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. Dated \_\_\_\_ 2024 Signature of a member or authorized representative of a member **EVENEL LOUIS-CHARLES** Typed or printed name of signee