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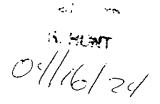
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NAME: VIE ELECTRIC, LLC

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| TO: | Registration S Division of Co | | | | |
|----------|--|--|--|---|------------|
| SUBJE | CT: | VIE ELECTRIC, LLC | | | |
| | | Name of Lin | nited Liability Company | | |
| | | f Amendment and fee(s) are sul | _ | | |
| Please | return all corresp | ondence concerning this matter | to the following: | | |
| | | Sarah Hoffman | | | |
| | | | Name of Person | | (reg. Ber) |
| | | Eavenson, Fraser & | <u> </u> | | |
| | | | Firm/Company | | |
| | | 4230 Pablo Professio | onal Court, Suite 103 | 200 - 100 - | |
| | | | Address | | |
| | | Jacksonville, FL 3 | 2224 | <u> </u> | |
| | | | City/State and Zip Code | SET A | |
| | | sarah@efli.law | to be used for future annual report not | • . • | Ę |
| For furt | her information | concerning this matter, please c | • | - LE 2 | |
| | Sarah Hoffman | ı | at (<u>904</u>) <u>425-99</u> | 75 | |
| | Name | of Person | | ne Telephone Number | |
| Enclose | d is a check for t | the following amount: | | | |
| ₺ \$25 | 5.00 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 Addre Registration Division of O P.O. Box 632 Tallahassee, | Section Corporations 27 | Street Address: Registration Se Division of Co The Centre of 7 2415 N. Monro Tallahassee, FI | rporations Fallahassee e Street, Suite 810 | |

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

VIE ELECTRIC, LLC

| (Name of the Limited Liability (A Florida I | Company as it now appears imited Liability Company) | on our records.) | | | |
|--|---|--|---------------------------------------|--|--|
| The Articles of Organization for this Limited Liability Co Florida document number | mpany were filed on | 10/19/2023 | _ and assigned | | |
| This amendment is submitted to amend the following: | | | | | |
| A. If amending name, enter the new name of the limite | ed liability company her | 2: | | | |
| The new name must be distinguishable and contain the words "Limite | ed Liability Company," the des | ignation "LLC" or the abbre | viation "L.L.C." | | |
| Enter new principal offices address, if applicable: | | | | | |
| (Principal office address MUST BE A STREET ADDRE | <u></u> | | *** | | |
| | | | · · · · · · · · · · · · · · · · · · · | | |
| | | 2. 2. * | .J | | |
| Enter new mailing address, if applicable: | | | | | |
| (Mailing address MAY BE A POST OFFICE BOX) | | | | | |
| | | | <u>8. 7</u> | | |
| B. If amending the registered agent and/or registered agent and/or the new registered office address here: Name of New Registered Agent: | office address on our rec | ords, <u>enter the name o</u> | f the new registered | | |
| New Registered Office Address: | T 11 -11 | | | | |
| | t:nter t*loride | rida street address | | | |
| | , Flo | | Zip Code | | |
| New Registered Agent's Signature, if changing Registered | • | | -7 | | |
| I hereby accept the appointment as registered agent an provisions of all statutes relative to the proper and con accept the obligations of my position as registered age being filed to merely reflect a change in the registered company has been notified in writing of this change. | uplete performance of m nt as provided for in Ch | y duties, and I am fam apter 605, F.S. Or, if t | iliar with and his document is | | |
| | If Changing Registered Agen | t. Signature of New Regist | ered 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 |
|--------------|------------------------|-----------------------------|-------------------------------------|
| MGR | VIE HOME SERVICES, LLC | 109 BELVEDERE PLACE | \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ |
| | | PONTE VEDRA BEACH, FL 32082 | ⊠Remove |
| | | | ©Change |
| MGR | JOHN L WALDROP III | 109 BELVEDERE PLACE | X Add |
| | | PONTE VEDRA BEACH, FL 32082 | □Remove |
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Page 2 of 3

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| ffective date, if other an effective date is listed, ote: If the date inserted ocument's effective date | ed in this block does t | not meet the ap | plicable statut | ling or more that ory filing requ | (option 90 days after irements, this | o nal) filing.) Pur s date will | suant to not be | 605.020 listed a |
| e record specifies a The 90th day afte | | | not an effe | ective time, | at 12:01 a | a.m. on t | he ea | ırlier d |
| | April 9 | | • | | | | | |
| ated | | | | _ | | | | |
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