M02000035

(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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300349439413

FILED 2020 AUG -3 AM 9:41

RECEIVED

2020 AUG -3 FH 1:

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

.

ACCOUNT NO. : 12000000195
REFERENCE : 311793 7612530
AUTHORIZATION: Spelle Cleman
COST LIMIT : \$ 25.00
ORDER DATE : June 4, 2020
ORDER TIME : 9:59 AM
ORDER NO. : 311793-060
CUSTOMER NO: 7612530
FOREIGN FILINGS
NAME: PARSONS ELECTRIC LLC
CORPORATE LIMITED PARTNERSHIP LIMITED LIABILITY COMPANY
XXXX AMENDMENT
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING

EXAMINER:

CONTACT PERSON: Amanda Robinson -- EXT# 62968

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

SECTION I (1-4 must be completed)

1. Name of limited liability Company as it appears o	n the records of the Flori	da Department o	of	
State: Parsons Electric LLC		<u> </u>	<u> </u>	_
Enter new principal office address, if applicable:				_
(Principal office address MUST BE A STREET ADDRESS)			2020 A	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			AND ASSESSED TO A STATE OF THE	
2. The Florida document number of this limited liabi	lity company is: M02000	0000735		<u>-</u>
3. Jurisdiction of its organization: 4. Date authorized to do business in Florida: 5. New name of the limited liability company: (If name unavailable, enter alternate name adopted f copy of the written consent of the managers or manamust contain "Limited Liability Company," "L.L.C.	anges) C Solutions LLC contain "Limited Liability or the purpose of transactions members adopting to	Company, ""	L.C.," or "Ll	LC.")
6. If amending the registered agent and/or registered registered agent and/or the new registered office add	iress nere.			<u>2W</u>
Name of New Registered Agent:				
New Registered Office Address:	Enter F	lorida Street Ac	idress	
		, Flori	da Zip Code	
	City		Zip Code	:
New Registered Agent's Signature, if changing Registered Agent hereby accept the appointment as registered agent the provisions of all statutes relative to the proper and accept the obligations of my position as registe document is being filed to merely reflect a change is liability company has been notified in writing of this	t and agree to act in this and complete performanc red agent as provided for in the registered office ad	e in Chantar 60	S FS Or if thi	is
lfC	nanging Registered Agen	t, Signature of N	Jew Registered	Agent

If the amendment cl	nanges person, title or capacity in a	accordance with 605.0902 (1)(e), indica	te that chan	ge:
e/ Capacity	<u>Name</u>	<u>Address</u>	Type of Action	
				□Add
				□Remo
				□Add
				□Remo
				2020 AUG
	·		SSVIII.	G-3 ₽Reme
			TA G	
				□Rem
				□Add
aforementioned ar	ficate, if required: no more than 9 nendment(s), duly authenticated b the law of w hich this entity is org	by the official having custody of record	ds in the	. □Rem
jurisdiction under	-the fla	if the authorized representative		

Filing Fee: \$25.00

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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY THAT THE SAID "PARSONS ELECTRIC

LLC", FILED A CERTIFICATE OF AMENDMENT, CHANGING ITS NAME TO

"PEC SOLUTIONS LLC" ON THE TWENTY-FOURTH DAY OF JUNE, A.D. 2020,

AT 4:29 O'CLOCK P.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE EFFECTIVE DATE OF THE AFORESAID CERTIFICATE OF AMENDMENT IS THE FIRST DAY OF AUGUST, A.D. 2020.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID LIMITED
LIABILITY COMPANY IS DULY FORMED UNDER THE LAWS OF THE STATE OF
DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE NOT
HAVING BEEN CANCELLED OR REVOKED SO FAR AS THE RECORDS OF THIS
OFFICE SHOW AND IS DULY AUTHORIZED TO TRANSACT BUSINESS.



Authentication: 203392394

Date: 08-03-20

3456800 8320 SR# 20206538838