M17000002749

(R	Requestor's Name)	_
	(ddress)	
(A	(ddress)	
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<u>-</u>		
(C	ity/State/Zip/Phone #)
PICK-UP	WAIT	MAIL
(B	dusiness Entity Name)	
	Occument Number)	
(5	odinent rumbery	
Certified Copies	Certificates	of Status
Special Instructions to Fil	ling Officer:	
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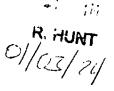
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CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 234758 , 8429361

AUTHORIZATION : Come Come)

COST LIMIT : \$ 25.00

ORDER DATE: December 29, 2023

ORDER TIME : 8:54 AM

ORDER NO. : 234758-010

CUSTOMER NO: 8429361

FOREIGN FILINGS

NAME: AMERICAN ELECTRICAL TESTING

CO., LLC

CORPORATE
LIMITED PARTNERSHIP

XX LIMITED LIABILITY COMPANY

XXXX AMENDMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

XX PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Alexxis Weiland-sorenson -- EXT#

EXAMINER:

COVER LETTER

	American Electrical Testing Co.,	IIC	
SUBJECT:		reign Limited Liability Company	
		ergn billined blability Company	
Dear Sir or M	ladam:		
The enclosed	application, certificate and feed	e(s) are submitted for filing.	
Please return	all correspondence concerning	g this matter to the following:	
Rebecca Roh	irer		
	Name of Person		
American Ele	ctrical Testing Co., LLC	,	
	Firm/Company	· · · ·	
708 Blair Mill	Rd		
	Address	OSEE, FL	
Willow Grove,	PA 19090	mi 4	
	City/State and Zip Co	ode	
rrohrer@utilse	ervllc.com		
E-mail add	ress: (to be used for future annu	ual report notification)	
For further in	formation concerning this matte	ter, please call:	
	Name of Person	at () Area Code & Daytime Telephone Number	
Mailin		Street Address:	
Mailing Address: Registration Section		Registration Section	
Divisi	ion of Corporations	Division of Corporations	
P.O. I	3ox 6327	The Centre of Tallahassee	
	nassee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	
		1 anana3500, 1 15 52505	
Tallah	sed is a check for the followin Fee □ \$30 Filing Fee &		

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 on the records of the Florida Department of
State: American Electrical Testing Co., LLC
Enter new principal office address, if applicable:
(<u>Principal office address</u> MUST BE A STREET ADDRESS)
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)
2. The Florida document number of this limited liability company is: M17000002749
3. Jurisdiction of its organization: Massachusetts 4. Date authorized to do business in Florida: 03/30/2017 SECTION II (5-9 complete only the applicable changes) 5. New name of the limited liability company: Asplundh Electrical Testing, LLC (must contain "Limited Liability Company," "L.L.C.," of LLC)
4. Date authorized to do business in Florida: 03/30/2017
SECTION II (5-9 complete only the applicable changes)
5. New name of the limited liability company: Asplundh Electrical Testing, LLC
SECTION II (5-9 complete only the applicable changes) 5. New name of the limited liability company: Asplundh Electrical Testing, LLC (must contain "Limited Liability Company," "L.L.C., of LLC.) (If name unavailable enter alternate name adopted for the number of transacting business in Florida and attach a
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must contain "Limited Liability Company," "L.L.C." or "LLC.")
6. If amending the registered agent and/or registered officer 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.

Title/ Capacity	<u>Name</u>	Address		Type of Action	
				□Add	
				□Remove	
		<u></u>		□Add	
		· · · - · · · · · · · · · · · · · · · ·		□Remove	
				□Ādd	
			<u>.</u> -	Remove	
			OF STATE	: [] PHI2:34	
				□Remove	
				□Add	
aforementioned am	cate, if required: no more than 90 da endment(s), duly authenticated by the law of which this entity is organiz	ne official having custody of record	s in the	□Remove	

Filing Fee: \$25.00



The Commonwealth of Massachusetts Secretary of the Commonwealth State House, Boston, Massachusetts 02133

December 15, 2023

TO WHOM IT MAY CONCERN:

I hereby certify that a certificate of organization of Limited Liability Company was filed in this office by

ASPLUNDH ELECTRICAL TESTING, LLC (ORGANIZED AS: AMERICAN ELECTRICAL TESTING CO., LLC)

in accordance with the provisions of Massachusetts General Laws Chapter 156C on March 13, 2017.

I also certify that the following amendments to said Limited Liability Company have been filed:

Merger Filed:

July 20, 2017

Amendment Filed:

December 7, 2023

I further certify that no other amendment to said certificate of organization has been filed: that, said Limited Liability Company has not filed a certificate of cancellation; that there are no proceedings presently pending under the Massachusetts General Laws Chapter 156C, § 70 for said Limited Liability Company's dissolution; and that, so far as appears of record, said Limited Liability Company has legal existence.



In testimony of which,

I have hereunto affixed the

Great Seal of the Commonwealth

on the date first above written.

William Francis Galicin

Secretary of the Commonwealth