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SEP 2 7 2016 S. YOUNG SECRETARY OF THE PALL AHASSEE, FLORIDA

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PHONE: (954) 763-6006 TELEFAX: (954) 764-5367 WWW.MMDPA.COM PAUL M. MAY (1954-1999)
ROBERT C. MEACHAM
WILLIAM C. DAVELL
CHRISTOPHER D. BARBER
CAROLYN B. BROMBACHER
JEFFREY A. HEGEWALD
JERRY D. TAMAYO
JEFFREY S. WOOD

September 22, 2016 From: Inottestad@mmdpa.com

Via: Federal Express Registration Section Division of Corporation 2661 Executive Center Circle Tallahassee, Florida 32301

Re:

Eau Gallie Energy, L.L.C. and 150th Street Energy, LLC

Our File No.: 2865.0161026

Dear Sir or Madam:

Enclosed is Mr. Wood's check in the amount of \$25.00 for the filing fees for the Amendment of Articles of Organization for Eau Gallie Energy, L.L.C.

I have enclosed a self-addressed stamped envelope for you to return a copy of my attention.

Very truly yours,

Sin I

Linda Nottestad, CP, FRP

**Enclosures** 

## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: Eau Gallie Energy, L.L.C.
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:
Jeffrey S. Wood, Esq.
Name of Person
May, Meacham & Davell, PA
Firm/Company
One Financial Plaza, Suite 2602
Address
Fort Lauderdale, Florida 33394
City/state and Zip Code
<u>Jwood@mmdpa.com</u> E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Jeffrey S. Wood954, 763-6006
Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:

□ \$55.00 Filing Fee &

Certified Copy

(additional copy is enclosed)

MAILING ADDRESS:

□ \$30.00 Filing Fee &

Certificate of Status

■ \$25.00 Filing Fee

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

## STREET/COURIER ADDRESS:

□ \$60.00 Filing Fee,

Certified Copy (additional copy is enclosed)

Certificate of Status &

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Eau Gallie Energy, L.L.C.					
(Name of the Limit	ted Liability Compa (A Florida Limited)	nny as it now appea Liability Company)	rs on our records.)		
The Articles of Organization for this Limited L Florida document number <u>L02000004286</u>	iability Company	were filed on Fo	ebruary 21, 2002	and assigned	
This amendment is submitted to amend the foll	owing:				
A. If amending name, enter the new name o	f the limited liab	ility company h	ere:		
N/A					
The new name must be distinguishable and end with the	words "Limited Liab	oility Company," the	designation "LLC" or the abbre	eviation "L.L.C."	
Enter new principal offices address, if applicable:		N/A		<b>3 2 9</b>	
(Principal office address MUST BE A STREET ADDRESS)				ST AND	
				<b>- 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2</b>	
		A 1 / A		RESE	
Enter new mailing address, if applicable:		N/A		<del>ज</del> स्था	
(Mailing address MAY BE A POST OFFICE	BOX)	·		<del>8</del>	
B. If amending the registered agent and registered agent and/or the new registered of Name of New Registered Agent:		<u>e</u> :	our records, enter the	name of the nev	
New Registered Office Address:	One Financ	cial Center, Su	uite 2602		
New Registerer Office Address.	Enter Florida street address				
	Fort Laude	rdale	, Florida 3339	)4	
	City			Zip Code	
New Registered Agent's Signature, if changing l	Registered Agent:				
I hereby accept the appointment as registere provisions of all statutes relative to the prop accept the obligations of my position as regi	er and complete	performance of	my duties, and I am fam	iliar with and	

If Changing Registered Agent, Signature of New Registered Agent

Page 1 of

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 amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager

AMBR = Authorized Member **Title** Name <u>Address</u> **Type of Action** Teresa Cruz 19470 NW 8th Street **MRGM** □ Add Pembroke Pines, FL 33029 
■ Remove Clemente E. Cruz 1093 Shotgun Road MRGM **■** Add Sunrise, Florida 33326 □ Remove □ Add ☐ Remøye □ Add □ Add ☐ Remove

). If ame	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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-	
(The effe	ive date, if other than the date of filing: (optional) ective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after e this document is filed by the Florida Department of State)
Dated	September 22, 2016
	Signature of a member or authorized representative of a member
	Clemente E. Cruz, Manager
	Typed or printed name of signee

SEP 26 PM 5: (

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Filing Fee: \$25.00