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Florida Department

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : BARBOSA LEGAL Account Number : T20110000049

Phone

: (305)501-4680

Fax Number : (305)359-9543

Enter the email address for this business entity to be used for #uturem annual report mailings. Enter only one email address please.

Email Address; BBARBOSA@BARBOSALEGAL.COM

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN CRED SOLAR ENERGY, LLC

Certificate of Status	0
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Page Count	05
Estimated Charge	\$25.00

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J. HARRIS

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COVER LETTER

TO:	Registration Se Division of Cor				
CHDIE	CRED SOI	LAR ENERGY, LLC			·
SOBJE	СТ:	Name of Lim	ited Liability Company		
The enc	losed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please r	eturn all correspo	ondence concerning this matter	to the following:		
		BRU	JNA BARBOSA		
			Name of Person		
		ВА	RBOSA LEGAL		
			Firm/Company		
		407 LIN	COLN ROAD PH-NI	E	
			Address		
		MIAN	MI BEACH, FL 3313		
		BBARBOSA@BARBOSA	City/State and Zip C LEGAL.COM	ode	
		_	to be used for future an	nual report notifi	ication)
For furt	her information c	oncerning this matter, please ca	all:		
BRUN	A BARBOSA		305 at (501-4680	
	Name o	f Person	Area Code	Daytime	Telephone Number
Enclose	d is a check for t	ne following amount:			
\$25	.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing I Certified Cop (additional copy	у	□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Regist Divisio P.O. B	ING ADDRESS: ration Section on of Corporations ox 6327 assee, FL 32314	Regi Divi Clift 2661	EET/COURII stration Section sion of Corpora on Building Executive Cen thassee, FL 323	ations nter Circle

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited	Liability Company as it now appears on o Florida Limited Liability Company)	ur records.)
The Articles of Organization for this Limited Lia Florida document number L15000080804	pility Company were filed on May 7, 2	2015 and assigned
This amendment is submitted to amend the follow	ving:	
4. If amending name, enter the new name of t	he limited liability company here:	
GREEN CHARCOAL, LLC		
The new name must be distinguishable and contain the wor	ds "Limited Liability Company," the designa	tion "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applical	ole: N/A	22. 22
(Principal office address MUST BE A STREET	ADDRESS)	
Enter new mailing address, if applicable:	N/A	800 N 1
Mailing address MAY BE A POST OFFICE B	<u> </u>	- <u> </u>
B. If amending the registered agent and/or registered agent and/or the new registered officers.		records, enter the name of the
Name of New Registered Agent:	N/A	
New Registered Office Address:	Enter Florida str	eet address
		, Florida
	<i>C</i> ι <i>τ</i> ν	Zıp 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

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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>	Name	Address	Type of Action
	N/A	N/A	□ Add
			□ Remove
			☐ Change
			Add
			□ Remove
			Change
			Add
			☐ Remove
			☐ Change
			Add
			☐ Remove
			☐ ☐ Change
			Dividid T
			Remove
			☐ Change
			☐ Remove
			□ Change

D. If amending any oth	er information	H16000022320 3 n, enter change(s) here: (Attach additional sheets, if n	prossami l
N/A	ier mitoriustioi	n enter enange(s) nere. (Anach adamona sneets, tj n	e coaster yrj
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E. Effective date, if oth	er than the da	te of filing:(o	ptional)
(If an effective date is liste	d, the date must be	specific and cannot be prior to date of filing or more than 90 days a does not meet the applicable statutory filing requirements,	itter filing.) Pursuant to 605.0207 this date will not be listed as
		rtment of State's records.	ma date will not be miled as
If the record specifies	s a delayed e	ffective date, but not an effective time, at 12:0	1 a.m. on the earlier o
(b) The 90th day aft	ter the record	d is filed.	
1431/14 D3/ 27		0017	
Dated		2016	
	/s/ Bruna		57. 53
	518	nature of a member or authorized representative of a member	
	BRUNA BAR	BOSA	100 miles
			per contract that a
		Typed or printed name of signee	10 T
		Typed or printed name of signee	
		Typed or printed name of signee Page 3 of 3	250 THE STATE OF T