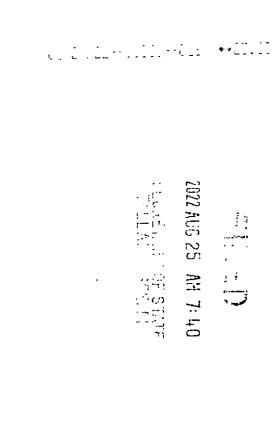
L16000057334

(Ře	equestor's Name)
(Ad	ddress)
(Ad	ddress)
(Cit	ty/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(Bu	usiness Entity Name)
(Do	ocument Number)
Certified Copies	Certificates of Status
Special Instructions to	Filing Officer:





300393213823



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COVER LETTER

eun irzet.	Sola LLC			
SUBJECT:Name of Limited Liability Company				
The enclosed	l Articles of /	Amendment and fee(s) are sub-	mitted for filing.	
Please return	all correspor	ndence concerning this matter t	to the following:	
		Olivia Wilson		
			Name of Person	
			Firm/Company	· • · · ·
		625 Rue Saint-Maurice		
			Address	
		Montréal, QC H3C 1L3, Ca	City/State and Zip Code	
		rainforestprotection2@gmai	Lcom	
For further in	nformation co	E-mail address: (t oncerning this matter, please ca	o be used for future annual report notificall:	cation)
Olivia Wilsc		-	at () Area Code Daytime	
	Name of	Person	Area Code Daytime	Telephone Number
Enclosed is a	check for th	e following amount:		
■ \$25.00 F	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

TO:

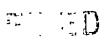
Registration Section Division of Corporations

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

Street Address:

Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



Sola LLC

2022 AUG 25 AH 7: 40

(Name of the Limite	d Liability Comps A Florida Limited	iny as it now appears on Liability Company)	1 our records.)	
The Articles of Organization for this Limited Lia	ibility Company	were filed on $\frac{03/21/3}{2}$	2016 and assigne	ed .
Florida document number L16000057334	·			
This amendment is submitted to amend the follow	wing:			
A. If amending name, enter the new name of	the limited liab	ility company here:		
Rainforest Protection L.L.C.				
The new name must be distinguishable and contain the wo	rds "Limited Liabi	lity Company," the design	nation "LLC" or the abbreviation "L.L.C."	
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		625 Rue Saint-Maurice Montréal, QC H3C H.3, Canada		
(Mailing address MAY BE A POST OFFICE B	ROX)	Montréal, QC H3C 1L3, Canada		
B. If amending the registered agent and/or reagent and/or the new registered office address		address on our reco	rds, enter the name of the new re	gisterec
Name of New Registered Agent:				··
New Registered Office Address:	101 W Forsyth St #214			
	Enter Florida street address			
	Jacksonville		, Florida 32202 Zip Code	
	*.a	City	z.p c.oae	
New Registered Agent's Signature, if changing R I hereby accept the appointment as registered provisions of all statutes relative to the prope accept the obligations of my position as regis being filed to merely reflect a change in the re company has been notified in writing of this c	l agent and agr r and complete tered agent as egistered office	ree to act in this cap performance of my provided for in Cha	duties, and Lam familiar with a pter 605, F.S. Or, if this docume	nd

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	O. Wilson	625 Rue Saint-Maurice	∃ Add
		Montréal, QC H3C 1L3, Canada	□Remove
MGR	Steph Martin	1950 W Corporate Way	□Add
		PMB 30077	■Remove
		Anaheim, CA 92801	□Change
		<u></u>	□Add
			□Remove
			□Change
			□Add
			□Remove
			Change
			□Add
			□Remove
			□Change
			□Add
			Remove
			□Change

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n man at			(anti-unal)	
Note: If t	date, if other than the date of filing: _ ve date is listed, the date must be specific and can the date inserted in this block does not meet 's effective date on the Department of State	t the applicable statutory fili	(optional) more than 90 days after filing.) Pur ng requirements, this date will	suant to 605,0207 (3)(not be listed as the
f the record s ecord is filed.	pecifies a delayed effective date, but not an	effective time, at 12:01 a.m	on the earlier of: (b) The 90	th day after the
Dated 08/	/15/2022			
Dated				
		IN/I/RMh	re of a member	

Filing Fee: \$25.00

Typed or printed name of signee