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EXAMINER



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COVER LETTER

	of Corporations		
SÚBJECT:	Golden Gas	Limited Liability Company)	·
	(Name of	Limited Liability Company)	
The enclosed Arti	cles of Amendment and fee(s) are	submitted for filing.	
Please return all c	orrespondence concerning this ma	atter to the following:	
		Miriam Nunez (Name of Person)	_
		(Name of Person)	
		•	
•		(Firm/Company)	
	11.	10 Brickell AVE, Su (Address)	uste 603
		(Address)	
•		Miranis Fil 33/3/	
	<u> </u>	(City/State and Zip Code)	· ·
For further inform	nation concerning this matter, plea	se call:	•
/	Miriam Nunez	at (305) 329 3/57 (Area Code & Daytime T	6
· · · · · · · · · · · · · · · · · · ·	(Name of Person)	(Area Code & Daytime T	elephone Number)
Enclosed is a chec	ck for the following amount:	·	
□ \$25.00 Filing	Fee S30.00 Filing Fee & Certificate of Statu	□\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□\$60.00.Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

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

STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

COVER LETTER

СТ:	folden faste (Name of Limi	Builders, Lol.C.	
losed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
eturn all correspo	ondence concerning this matter	to the following:	
		Miriam Nunez	
	<u>. </u>	(Name of Person)	
		(Firm/Company)	
	1110	Brickell AVE, Si	vite 603
		Maris, F. (33/3/	·
		(City/State and Zip Code)	· · · · · · · · · · · · · · · · · · ·
her information of	concerning this matter, please ca	all:	
Mirio	am Nunez	at (305) 329 3150	6
(Name	of Person)	(Area Code & Daytime T	elephone Number)
;			
d is a check for t	he following amount:		
00 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)
	Division of Concern all correspondent information of Name disacheck for the content of the conte	her information concerning this matter, please concerning this matter. Minimal Number	CT: Solden Gase Builders, LLC (Name of Limited Liability Company) losed Articles of Amendment and fee(s) are submitted for filing. eturn all correspondence concerning this matter to the following: Miriam Mune2

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

STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ONVISION OF CORPORATION

08 JUN 27 PH 2: 48

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

Golden Gase	
(Name of the Limited Liability Compan (A Florida Limited Li	ny as it now appears on our records.)
The Articles of Organization for this Limited Liability Company Florida document number 493000024625	were filed on $07/07/2003$ and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liable	ility company here:
The new name must be distinguishable and end with the words "Limit	Energy LLC
The new name must be distinguishable and end with the words "Limit "L.L.C."	ted Liability Company," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	1110 Brickell Dvenice Suite 603 Twans Fl 33131
(Principal office address MUST BE A STREET ADDRESS)	Su. 40 603
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE ROX)	1110 Britall Breace Sisse 603 Mianis 17133131
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here	Note address on our records, enter the name of the new $\underline{\mathbf{r}}$:
Name of New Registered Accut:	Miriam Nunez
New Registered Office Address: 124	45 NE 854h Street (Enter Florida street address) Miane; Florida 83/38 (City) (Zip Code)
·	(Enter Florida street address)
	Mianei , Florida 33/38
•	
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 608, 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 itability company has been notified in writing of this change.

(If Changing Register of Agont, Signature of New Revisional Agent)

Page 1 of 2

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

MGR = Manager MGRM = Managing Member

<u>Title</u>	Name	<u>Address</u>	Type of Action
MGR.	Viscard UC	PO BOX 402984	Add Remove
MER	Miriam Nunez	1245 NE 85 Street	Add Remove
<u> </u>	· .		Add Remove
			Add Remove
	· .		Add Remove
			Add Remove
D. If amend	ding any other information, enter change	s(n) Inern: (Attach additional sheets, if necessary.)	1
-			
Dated	June 17 , 200	08.	
	· · · · · · · · · · · · · · · · · · ·	or sulhorized representative of a member	<u> </u>
	Typed	Miridan Nunez	
	1,,,,,,	Page 2 of 2	

Page 2 of 2

Filing Fee: \$25.00