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COVER LETTER

TO: Registration S Division of Co			
APR ENE	RGY, LLC		
SUBJECT:	Name of Limited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Brenda Smith		
		Name of Person	, <u></u>
	APR Energy		
		Firm/Company	
	3600 Port Jacksonville I	Parkway	
	-	Address	·
	Jacksonville, FL 32226		
		City/State and Zip Code	
	Brenda.smith@aprenerg		
		to be used for future annual report notifi	cation)
For further information c	concerning this matter, please c	all:	
Brenda Smith		904 223-2306 at ()	
Name o	of Person		Telephone Number
Enclosed is a check for the	he following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address Registration S	Section	<u>Street Address:</u> Registration Sect	
Division of C	orporations	Division of Corp	orations

Tallahassee, FL 32314

P.O. Box 6327

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

(Name of the Limited Liability Company as it now appears on our records.)

(A Florida Limited Liability Company) APR ENERGY, LLC The Articles of Organization for this Limited Liability Company were filed on March 15, 2005 and assigned Florida document number ____L05000110400 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office 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

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

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 2020 JULI - 9 FII 6: 57	Type of Action
CFO	Ronald Crowell	3600 Port Jacksonville Pkwy, Jax, FL 32226	🗆 Add
		· 	\bullet Remove
			□ Change
President Brian	Brian Rich	3600 Port Jacksonville Pkwy, Jax, FL 32226	= Add
			□Remove
			□Change
			□Add
			□Remove
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Effective date, if other than th	ate of filing: (ontional)	
f an effective date is listed, the date m	ate of filing: (optional) be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(
Note: If the date inserted in this lidented to the lidented and the lidented are the lidented and the lidented are the lident	k does not meet the applicable statutory filing requirements, this date will not be listed as the	
record specifies a delayed effecti d is filed.	date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the	
June 1	2020	
	5	

Typed or printed name of signee