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EXAMINER

Men Mame: COVER LETTER TO: Registration Section +van: A-17. Projective Services, LLC Division of Corporations To: Quanter Energy Solutions of america, L (Name of Limited Liability Company)	L(
The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following:	
Donald D. Leygett, Jv. (Name of Person) (Name of Person) (Name of Person) (Name of Person) (Pirm/Company) (Firm/Company) (Address) Tanga, f. 33682 (City/State and Zip Code)	٠, ৩
For further information concerning this matter, please call: Donald O. Lex & H. V. St 9 = 7 - 9993	

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Q4H. Protective			
(<u>Name of the Limited Liability Compa</u> (A Florida Limited I	ny as it now appears on our records.) Liability Company)		
The Articles of Organization for this Limited Liability Company Florida document number		and assigned	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liable and end with the words "Lim." The new name must be distinguishable and end with the words "Lim." L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	oility company here: MS UF America ited Liability Company," the designation	"LLC" or the abbreviation	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	WW	SEGRE ST	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her	ffice address on our records, <u>enter</u> <u>e</u> :		
Name of New Registered Agent:	-	AM IO: H	
New Registered Office Address:	(Enter Florida street a	address)	
	, Florida		
	(City)	(Zip 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 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 liability company has been notified in writing of this change.

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 **Address** Type of Action Title **Name** Aln ___ Add Remove ☐ Add Remove **₼** Add Remove ☐ Add Remove ☐ Add Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) NLA Sept. 19 Dated _ Signature of a member or authorized representative of a member Typed or printed name of signee Page 2 of 2

Filing Fee: \$25.00