L06000039767

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10 MAY - 4 PM 4: 04

SECRETARY OF STATE

J. BRYAN

MAY -5 2010

EXAMINER

COVER LETTER

TO: Registration S Division of Co				
SUBJECT:	New	/ Solar LLC		
SUBJECT.		ted Liability Company	90 6 n	
The enclosed Articles o	f Amendment and fee(s) are sul	omitted for filing.	TOMAN - PH 4: OF STATE PHONE P	
Please return all corresp	oondence concerning this matter	to the following:	SEEL PAR	
		Al Romani Name of Person	OR OF CARD	
	Firm/Company 103 Commerce Street, Suite 100 Address			
	1	Lake Mary, FL 32746		
	B-mail address: (City/State and Zip Code ani@premieretrade.com to be used for future annual report notific	cation)	
For further information	concerning this matter, please of	•		
Name	Al Romani of Person	at (_407_) Z	265-1212 Telephone Number	
Enclosed is a check for	the 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 Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		STREET/COURING Registration Section Division of Corpora Clifton Building 2661 Executive Cer Tallahassee, FL 323	n ntions nter Circle	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	ON THE	FILED
records.)	OF STRING	THE OWNER OF THE PARTY OF THE P

New Sol	lar LLC		
(Name of the Limited Liability Compa (A Florida Limited L	ny as it now appea Liability Company)	ars on our records.)	To the total of th
The Articles of Organization for this Limited Liability Company Florida document numberL06000039767			and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ility company he	ere:	
Apopka Air Pro			
The new name must be distinguishable and end with the words "Limi "L.L.C."	ited Liability Comp	pany," the designation "Ll	C" or the abbreviation
Enter new principal offices address, if applicable: 103 Commerce Stre			0
(Principal office address MUST BE A STREET ADDRESS) La		FL 32746	
Enter new mailing address, if applicable:	103 Comme	rce Street, Suite 10	0
(Mailing address MAY BE A POST OFFICE BOX)	Lake Mary,	FL 32746	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		our records, enter th	e name of the new
Name of New Registered Agent:			
New Registered Office Address:	E	nter Florida street addr	ess
		TH. 43	
	City	, Florida	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 Changing Registered Agent, Signature of New Registered Agent

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 = Ma MGRM = N	mager Managing Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			□ Pemove
			Add Remove
	<u></u>		□ D
			AddRemove
	· · · · · · · · · · · · · · · · · · ·		Remove
D. If amen — — —	ding any other information,	enter change(s) here: (Attach additional sh	TO MAY -4 PH 4: 04 TO MAY -4 PH 4: 04 TO MAY -4 PH 4: 04
Dated	April 30		ORIGINAL .
	Signatur	James E. Dicks	member
		Typed or printed name of signee	

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Filing Fee: \$25.00