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DIVISION OF CORPORATION

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COVER LETTER

TO:	Registration Sec Division of Corp			
erto II		ENSIVE ENERGY PROPER	TIES, LLC	
SUBJ	ECT:	Name of Lim	ited Liability Company	
The en	closed Articles of A	Amendment and fee(s) are sub	mitted for filing.	
Please	return all correspor	ndence concerning this matter	to the following:	
		TODD S. MORGAN		
			Name of Person	
		COMPREHENSIVE ENE	RGY PROPERTIES, LLC	
			Firm/Company	
		777 BENNETT DRIVE		
			Address	· · · · ·
		LONGWOOD, FL 32750		
			City/State and Zip Code	
		toddm@cesmechanical.com		
		E-mail address: (to be used for future annual report no	tification)
For fu	rther information co	oncerning this matter, please ca	all:	
Todd:	S. Morgan		407 682-1313 at ()	
	Name of	Person	Area Code Daytii	ne Telephone Number
Enclos	sed is a check for th	e following amount:		
\$ \$2	5.00 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)

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

The new name must be distinguishable and contain the words "Limited Liab	lity Company," the designation "LLC"	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	N/A	
(Principal office address MUST BE A STREET ADDRESS)		
		18 18
		MAN TO SE
Enter new mailing address, if applicable:	N/A	21 21
		——————————————————————————————————————

A. If amending name, enter the new name of the limited liability company here:

N/A

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:

Todd C Murnen

	City	Zip Code	
	Longwood	, Florida 32750	
New Registered Office Address:	777 Bennett Drive Ente	r Florida street address	
Name of New Registered Agent:	rodd 3. Wlorgan		

New Registered Agent's Signature, if changing Registered Agent:

(Mailing address MAY BE A POST OFFICE BOX)

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	Type of Action
N/A			Add
		***************************************	Remove
			Change
			☐ Remove
			Change
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			☐ Change
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Page 3 of 3

Filing Fee: \$25.00

Typed or printed name of signee