

LO70000 33678

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

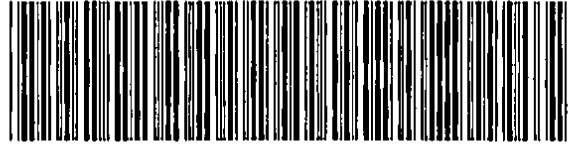
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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09/09/19--01041--030 ++25.00

2019 SEP -9 PM 2:53

Amend

SEP 17 2019
ALBRITTON

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: FALCONBRIDGE SERVICES, LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

BRENDA SMITH

Name of Person

FALCONBRIDGE SERVICES, LLC

Firm/Company

3600 PORT JACKSONVILLE PARKWAY

Address

JACKSONVILLE, FL 32226

City/State and Zip Code

LEGAL@APREENERGY.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

BRENDA SMITH

Name of Person

at ()
A.

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee ☐ \$30.00 Filing Fee &
Certificate of Status

☐ \$55.00 +
Certific
(addition)

MAILING ADDRESS:

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

Div of Corp:
Please process to corporate
entity changes -
The COO is now the
CEO - Chief Executive Officer,
Charles Perry

Thx B. Smith

2661 Executive Center Circle
Tallahassee, FL 32301

2019-01-03 PM 2:53

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

This amendment is submitted to amend the following:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

(Principal office address MUST BE A STREET ADDRESS)

(Mailing address MAY BE A POST OFFICE BOX)

Zip Code

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.

Page 1 of 3

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>	<u>Address</u>	<u>Type of Action</u>
CEO	CHARLES FERRY	3600 PORT JACKSONVILLE PARKWAY	<input type="checkbox"/> Add
		JACKSONVILLE, FL 32226	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
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[illegible]

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

August 26, 2019



Benjamin See

Typed or printed name of signee