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COVER LETTER
TO: Registration Section Division of Corporations
SUBJECT: <u>ReD</u> SoLAR ENERGY, 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:
CHARLES FRITZ (Name of Person) GOPS GROUP, LLC (Firm/Company)
993 S. LAKE SUMMIT RD. (Address)
SALUDA, NC 28773

(City/State and Zip Code)

\_\_\_\_.

For further information concerning this matter, please call:

a service of the second

BRETT FRITZ

(Name of Person)

Enclosed is a check for the following amount:

\$25.00 Filing Fee

Solution Status 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

## P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

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	ergy, LLC	
( <u>Name of the Limited Liability Compa</u> (A Florida Limited I	ny as it now appears on ou iability Company)	<u>r records.</u> )
The Articles of Organization for this Limited Liability Company	were filed on $4/2$	2/2008 and assigned
Florida document number6800004025		
	0	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here: 🏾 🕅	ED ENERGY
A. If amending name, <u>enter the new name of the limited liab</u>	<u>. 1</u>	GROUP, LL
The new name must be distinguishable and end with the words "Lim		
"L.L.C."		08 TAL
Enter new principal offices address, if applicable:		
<u>(Principal office address MUST BE A STREET ADDRESS)</u>		
	$\longrightarrow$	
Tates any mailing address if any lighter	× /	PH D FLOR
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	X	
(Maining augress MAT DE A FOST OFFICE DOA)	/	
B. If amending the registered agent and/or registered of		ords, <u>enter the name of the new</u>
registered agent and/or the new registered office address her	<u>e</u> :	
Name of New Registered Agent:	$\backslash$	
	$\overline{\boldsymbol{\lambda}}$	
New Registered Office Address:	(Enter Flo	rida street address)
		. Florida
	(City)	, Florida (Zip Code)
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agr	as to get in this sense.	I further agree to some busit
the provisions of all statutes relative to the proper and comp		

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, <u>enter the title, name, and address of each Manager</u> or Managing Member being added or removed from our records:

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MGR = M MGRM =	lanager Managing Member	• •	
: <u>Title</u>	<u>Name</u>	Address	<b>Type of Action</b>
MGRM	CHARLES FRITZ	2712 MCGREBOR BLVD.	Add
		FORT MYERS, FL 33901	Remove
MGRM	LARS MANSSON	3613 DEL PRADO BLVD. CAPE LORAL, FL. 33904	Add Remove
			Add Remove
			Add Remove
<b>.</b> .			Add Remove
			Add Remove

**D.** If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

			0.07	t		
						FILED 08 MAY 23 PH 2: 27 SECRETARY OF STATE TALLAHASSEE, FLORIDA
Dated		_ :	· / ··			
		But	157			
		Signature of a	a member or authoriz	ea representative		
	i	3RETT	FRITZ Typed or printed r	GOPS	GROUP,	LLC
			<ul> <li>Typed or printed r</li> </ul>	name of signee		

Page 2 of 2

Filing Fee: \$25.00

If amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager</u> or Managing Member being added or removed from our records:

## MGR = Manager MGRM = Managing Member

•

<u>Title</u>	Name	Address	Type of Action
MGR	Dylan Rodmyre, RODMYRE, INC.	3830 LAKE ST. FT. MYERS, FL 33901	Add Remove
MGRM	GOPS GROUP, LLC	993 S. LAKE SUMMIT Rd. SALUDA, NC 28773	Add Remove
MGR	George C. Benson	16520 S. Tamiami Trail # 18 FOFT MYERS, FL. 33908	Add
MGR	DERMOTT MUNULTY	2885 PALM BEACH BLU UNIT GOT-A FORT MYERS, FL 33916	Add Remove
MGR	CRAIG BRUMELS	1481 WAUKAZOO DRIVE HOLLAND, MI 49424	Add Remove
MGR	FTB Services, LLC	3613 DEL PRADO BLUE CAPE CORAL, FL 33904	

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

	SEE SEE			
•		FILED		
•	2: 2: ORIDA			
Dated	Butt ST			
Signature of a member of authorized representative of a member				
	BRETT FRITZ GOPS GROUP, LLC Typed or printed name of signee			
	Page 2 of 2			

Filing Fee: \$25.00

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