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S. HAWKES

MAR 2 4 2009

EXAMINER

COVER LETTER

TO: Registration Sec Division of Corp			
SUBJECT: GREEN-	VOLT. LLC		•
SUBJECT. OTTE		ited Liability Company)	
The enclosed Articles of A	mendment and fee(s) are sub	mitted for filing.	
Please return all correspon	dence concerning this matter	to the following:	
	EDUARDO F. MORRELI	_	
		(Name of Person)	
	MORRELL, WATSON &	SOUTHWELL, P.A.	
		(Firm/Company)	
	187 LAKE MORTON DR		
		(Address)	
	LAKELAND, FL 33801		
	" "	(City/State and Zip Code)	
For further information co	ncerning this matter, please c	all:	
EDUARDO F. MORREL	L	at (863) 802-8037	
(Name of	Person)	(Area Code & Daytime T	clephone Number)
Enclosed is a check for the	e following amount:		
☑ \$25.00 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

GREEN-VOLT, LLC

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

Florida document number L08000114555 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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: Name of New Registered Agent: New Registered Office Address: (Enter Florida street address) Florida (Zip Code)	The Articles of Organization for this Limited Liability C	Company were filed on 12/16/200	8 an assigned	
A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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: Name of New Registered Agent: New Registered Office Address: (Enter Florida street address) Florida (City) (Zip Code)			ASSECTION AND ADDRESS OF THE PARTY OF THE PA	
The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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: Name of New Registered Agent: New Registered Office Address: (Enter Florida street address) (City) (Zip Code)	This amendment is submitted to amend the following:			
"L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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 address here: Name of New Registered Agent: New Registered Office Address: (Enter Florida street address) (City) (Zip Code)	A. If amending name, enter the new name of the limit	ited liability company here:	4	
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Name of New Registered Agent: New Registered Office Address: (Enter Florida street address) , Florida (City) (Zip Code)	• • • • • • • • • • • • • • • • • • • •			
New Registered Office Address: (Enter Florida street address) , Florida (City) (Zip Code)			cords, enter the name of the new	
(Enter Florida street address) , Florida (City) (Zip Code)	Name of New Registered Agent:			
	New Registered Office Address:			
(City) (Zip Code)		(Enter Florida street address)		
		(C:+.)		
Now Hagistaned Agentle Vigneture if shanging Hagistaned Agent.	New Registered Agent's Signature, if changing Registered	• • • •	(Lip Coae)	

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 = Manager

MGRM = Managing Member <u>Title</u> Name **Address** Type of Action **MGRM** FRED HAVERS 411 LONE PALM DRVIE **■** Add LAKELAND, FL 33815 Remove SHANE WILLIS MGRM 411 LONE PALM DRVIE LAKELAND, FL 33815 ☐ Add Remove ☐ Add Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) 2009 Signature of a member or authorized representative of a member JOHN D. WILLIS Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00