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· (F	Requestor's Name)		
(A	Address)		
(A	Address)		
(0	City/State/Zip/Phone #)		
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(E	Business Entity Name)	·	
(Document Number)			
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JUL 2 8 2009 EXAMINER

COVER LETTER

TO: Regis	ration Section 5	**	rian, r
5Ng.	Au	₩,	
SUBJECT:	Gree	enatech.LLC	
SUBJECT		ited Liability Company	
The enclosed A	rticles of Amendment and fee(s) are sul	bmitted for filing.	
Please return a	I correspondence concerning this matter	r to the following:	
		John A. Sutton	
		Name of Person	
		Greenatech,LLC	
		Firm/Company	
		1609 Landau Rd	
		Address	
	J	acksonville, FL 32225	
		City/State and Zip Code	
	js:	utton@greenatech.net to be used for future annual report notific	ation)
For further info	rmation concerning this matter, please	•	
	John A. Sutton	at (904)	25-9557
	Name of Person	Area Code & Daytime	Telephone Number
Enclosed is a c	neck for the following amount:		
₹ 25.00 Fili	g 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**

FILED

			2009 JUL 2	7 PM 2: 27
Greenate	ech,LLC			
(Name of the Limited Liability Compa (A Florida Limited I	ny as it new appe Liability Company))	TALLAHAS:	SEE, FLORIDA
The Articles of Organization for this Limited Liability Company	were filed on _	February 2,	, 2009 and	assigned
Florida document numberL0900010610				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liab	oility company h	ere:		
The new name must be distinguishable and end with the words "Lim"L.L.C."	ited Liability Com	pany," the design	nation "LLC" or t	he abbreviation
Enter new principal offices address, if applicable:		· · · · · · · · · · · · · · · · · · ·	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
(Principal office address MUST BE A STREET ADDRESS)	***************************************	 		
Enter new mailing address, if applicable:	12620-3 Be	ach Blvd. #3	326	
(Mailing address MAY BE A POST OFFICE BOX)	Jacksonville	e, FL 32246		
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		our records,	enter the nam	e of the new
Name of New Registered Agent:				
New Registered Office Address:		Enter Florida str	reet address	
	Emer Frontaa street aaaress			
	City	, Flor	ridaZip C	
New Registered Agent's Signature, if changing Registered Agent	i		-	

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	Charles M. Sutton	4539 S. Wabash Unit Chicago, IL 60653	☐ Add Remove
MGR	Dennis M. Cosby	8854 N. 30th Ave Bitely, Mi 49309	Add Remove
			Add Remove
		Add Remove	
		Add Remove	
			Add Remove
D. If amen	ding any other information, enter	change(s) here: (Attach additional sheets, if necess	ary.)
			
			2009
Dated	July 22 ,	2009	ZOOD JUL 27 P JSEGRETARY C JALLAHASSEE
		John A. Sutton Typed or printed name of signee	
		Page 2 of 2	2: 27 STATE BRIDA

Filing Fee: \$25.00