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| (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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S. YOUNG

COVER LETTER

| TO: Registration Sec Division of Corp | | | |
|--|---|---|--|
| APR Interna | | | |
| | Name of Lim | ited Liability Company | |
| The enclosed Articles of A | amendment and fee(s) are sub | mitted for filing. | |
| Please return all correspon | dence concerning this matter | to the following: | |
| | Brenda Smith | | |
| | | Name of Person | |
| | APR Energy | | |
| | | Firm/Company | |
| | 3600 Port Jacksonville P | rkwy | |
| | | Address | |
| | Jacksonville, FL 32226 | | |
| | | City/State and Zip Code | |
| | E-mail address: (| to be used for future annual report notifi- | cation) |
| For further information co | ncerning this matter, please ca | all: | |
| Brenda Smith | | 904 223-2306 | |
| Name of | Person | at () Area Code Daytime | Telephone 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 | | Street Address: | |

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, Fl. 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

APR International, LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on March 4, 2009 Florida document number L09000021360 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 contain 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 oddress

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

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 |
|--------------|------------------|---|----------------|
| Treasurer | Ben See | 3600 Port Jacksonville Pkwy, Jax, FL 32226 | □Add |
| | | | ■Remove |
| | | | □Change |
| Treasurer | Matthew Borys | 3600 Port Jacksonville Pkwy, Jax, Fl. 32226 | ■Add |
| | | | |
| | | | DChange |
| Secretary | Joseph DiCamillo | 3600 Port Jacksonville Pkwy, Jax, FL 32226 | = Add |
| | | | □Remove |
| | | | □Change |
| | | | 🗆 🗆 Add |
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| ffective date, if other than the an effective date is listed, the date mu- lote: If the date inserted in this blocument's effective date on the D | st be specific and can lock does not meet | the applicable st | | | |
| record specifies a delayed effectiv Lis filed. | e date, but not an o | effective time, at | 12:01 a.m. on the o | earlier of: (b) The 90th | day after the |
| ated March 11 | Z | 000 | | | |
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Filing Fee: \$25.00