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SECRETARY OF STATE
SECRETARY OF STATE
SECRETARY OF STATE
OF ALL AHASSEE, FLORIO

J. BRYAN

NOV -4 2009

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Oreen Energy Construction 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:
Dranleigh Panlow III
Oreen Energy Construction Laco
132W Park Dre I Ve 9 STATE & THE
Edgewater, FL 32/32 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Stanletgh Sanson TIL at (386) 402 - 4976 Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\ \text{Certificate of Status}\$\$ \$55.00 Filing Fee & \text{Certified Copy} \\ (additional copy is enclosed) \$\ \t

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



This amendment is submitted to amend the following:

A. If amending name, enter the new name of th	e limited liability company here:
~ · · · · · · · · · · · · · · · · · · ·	n + Wind LLC
The new name must be distinguishable and end with the "L.L.C."	ne words "Limited Liability Company," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicabl	e:
(Principal office address MUST BE A STREET A	ADDRESS)
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BO	<u></u>
B. If amending the registered agent and/or registered agent and/or the new registered office	registered office address on our records, enter the name of the new
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
· -	, Florida
	City Zin Code

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 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 = M: MGRM = 1	anager () Managing Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add
			Remove
			Add Remove
			Remove
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			Add
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D 16	. 1	Thomas (Assach additional above is	(
D. II amen	iding any other information, enter	change(s) here: (Attach additional sheets, if	necessary.)
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			P 09 NOV SECRETA
<u> </u>			FIL IOV -3 RETARY NHASSE
Dated	October 29.	2009	773 — .
	A. I. R.		AH ID: 58
		nember or authorized representative of a member	10 ² 58
	_ Vyanleiga	Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00