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SEGRETARY OF STATE
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COVER LETTER

	tion Section of Corporations				
SUBJECT:	Solar Corporate Strategies LLC				
	Name of Limited Liability Company				
The enclosed Arti	cles of Amendment and fee(s) are submitted for filing.				
Please return all c	orrespondence concerning this matter to the following:				
	Thomas Tedrow				
	Name of Person				
	Firm/Company				
	PO Box 2879				
	Address				
	Winter Park, FL 32789				
City/State and Zip Code					
	tedrow@hotmail.com E-mail address: (to be used for future annual report notification)				
For further inform	ation concerning this matter, please call:				
	Thomas Tedrow at (407) 645-4255 Name of Person Area Code & Daytime Telephone Number				
	The could be buy mile to option the manual				
Enclosed is a chec	k for the following amount:				
▼ \$25.00 Filing I	Fee \$\int_{\}^{\}30.00\$ Filing Fee & \$\int_{\}^{\}55.00\$ Filing Fee & \$\int_{\}^{\}60.00\$ Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) 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

Solar (Name of the Limited) (A	Corporate Liability Compa Florida Limited I	Strategies LLC ny as it now appears on Liability Company)	our records.)		
The Articles of Organization for this Limited Liz Florida document numberL10000006		were filed on	1/19/2010	and assig	med
This amendment is submitted to amend the follo	wing:				
A. If amending name, enter the new name of	the limited liab	ility company here:			
Mal	e Performano	ce Group LLC			
The new name must be distinguishable and end with "L.L.C."	the words "Limi	ted Liability Company,"	the designation "	'LLC" or the ab	breviation
Enter new principal offices address, if applica	1001 Bonita Dr.				
(Principal office address MUST BE A STREET ADDRESS)		Winter Park, FL 32789			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B B. If amending the registered agent and/o registered agent and/or the new registered off Name of New Registered Agent:	r registered of ice address her		ecords, enter	the name of	the new
New Registered Office Address: 1001 Bonita		Dr.	•~	ASS 1	·
New Registered Office Address.			lorida street add	27 Cade	
New Registered Agent's Signature, if changing Registered Agent:				PH 1:	
I hereby accept the appointment as registered the provisions of all statutes relative to the pr accept the obligations of my position as regis being filed to merely reflect a change in the re company has been notified in writing of this c	oper and comp tered agent as p egistered office hange.	lete performance of m provided for in Chapte	y duties, and I r 608, H.S. Or, Firm that the li	am familiar w , if this docum mited liability	vith and entries

Page 1 of 2

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

Type of Action Title <u>Name</u> **Address MGRM Thomas Tedrow** 1001 Bonita Dr. **✓** Add Winter Park, FL 32789 Remove ☐ Add Remove ☐ Add Remove Remove ∏Add ___ Remove □Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) May 24 Dated ___ Signature of a mem authorized representative of a member DREW Typed or printed name of signee

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Filing Fee: \$25.00