

L10000009304

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
2013 MAR 21 AM 11:56

C. LEWIS
MAR 22 2013
EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: **ENERGY GREEN WAVE 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:

RAUL HUGO CARRIL

Name of Person

HOCAR ENERGY GROUP LLC

Firm/Company

10030 SW 49th STREET

Address

COOPER CITY, FL, 33328

City/State and Zip Code

rebcar1@hotmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

RAUL H. CARRIL

Name of Person

at (**305**) **7253096**

Area Code & Daytime Telephone Number

Enclosed is a check for the 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**

FILED
SECRETARY OF STATE
DIVISION OF CORPORATION

2013 MAR 21 AM 11:56

ENERGY GREEN WAVE 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 01/26/2010 and assigned
Florida document number L10000009304.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

HOCAR ENERGY GROUP LLC

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)

2655 LE JEUNE RD

FOURTH FLOOR

CORAL GABLES, FL-33134

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

PO BOX 840025

PEMBROKE PINES

FL-33084

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:

RAUL HUGO CARRIL

New Registered Office Address:

5578 NW 161 ST

Enter Florida street address

MIAMI GARDENS

City

, Florida 33054

Zip 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 = Manager
MGRM = Managing Member

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<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	CARRIL DESIGNS LLC	PO BOX 840025	<input type="checkbox"/> Add
		P. PINES, FL-33084	<input checked="" type="checkbox"/> Remove
MGRM	RAUL HUGO CARRIL	5578 NW 161th STREET	<input checked="" type="checkbox"/> Add
		MIAMI GARDENS	<input type="checkbox"/> Remove
		FL-33054	
MGR	AAM HOMES INC.	3210 22nd AVENUE NE	<input checked="" type="checkbox"/> Add
		NAPLES, FL-34120	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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Dated 03/18

2013

Signature of a member or authorized representative of a member

RAUL HUGO CARRIL

Typed or printed name of signee

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Filing Fee: \$25.00