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Special Instructions to	Filing Officer:	
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Office Use Only



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2019 HAR 20 PH 2: 35

R. WOUNG

# **COVER LETTER**

TO: Registration Section Division of Corpo			
SUBJECT:	reen Energy	Homes LLC	
The enclosed Articles of Ar	nendment and fee(s) are sub	mitted for filing.	
Please return all correspond	ience concerning this matter	to the following:	
	W	Q f( w S J Smoo	ik
		n Energy Home	s LLC
	<u> </u>	710 Frontier	une
		-duba' ET	33625
	E-mail address: (	City/State and Zip Code  Sook Mai O  o be used for future annual report notifi	7 m 91/. (om eation)
For further information con-	cerning this matter, please ca	dl:	
Manusi	J. Smook	at (88) — 96 Area Code Daytime	6.1674
Name of P	erson	Area Code Daytime	Telephone Numbér
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

CTC	een Energy Hon	2019 HAR 20 LPH 2: 35
(Name of the Limited Lia (A Flo	bility Company as it now appears on o rida Limited Liability Company)	ur records.)
The Articles of Organization for this Limited Liability Florida document number $-1000024$	y Company were filed on <u>3</u> .84.7	5 2010 and assigned
This amendment is submitted to amend the following	:	
A. If amending name, enter the new name of the I  The new name must be distinguishable and contain the words "I		tion "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET AD	DRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BON)		
B. If amending the registered agent and/or re registered agent and/or the new registered office a	gistered office address on our <u>ddress here</u> :	records, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida str	vet address
	City	Florida Zip Code
N 10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		<i>24.</i> Com

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>	Name	Address	Type of Action
			□ Add
			□ Remove
			☐ Change
			Add
			□ Remove
			Change
	<del></del>		
			Remove
			Change
	_		Add
			Remove
			Change
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			□ Remove
		<del>.</del>	Change
			□ Add
			☐ Remove
			☐ Change

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