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JUN 1 2021 R. HUNT

COVER LETTER

TO:

Registration Section

Division of Corporations
SUBJECT: American Power + Gas 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: 200359578262 03/01/2101024004
LISA Barry Name of Person
American Power + Gas LLC Firm/Company
10601 Belcher Rd S
Seminole FL 33777 City/State and Zip Code regulatory @ ap apg. com E-mail address: (to be used for fature annual report notification)
For further information concerning this matter, please call:
LISA Barry at (127) 479-0731 Area Code Daytime Telephone Number
Enclosed is a check for the following amount: PM+ on File
□ \$25.00 Filing Fee □ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certificate of Status □ Certified Copy □ Certificate of Status & □ Certified Copy □ Certi
Mailing Address:Street Address:Registration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of TallahasseeTallahassee, FL 323142415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

AMERICAN POWER & GAS, 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 $\frac{3/06/2010}{1}$ _____ and assigned Florida document number [1,10000027471 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 "LEC" or the abbreviation "L.L.C." 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 address

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.

City

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

Title	<u>Name</u>	Address	Type of Action
CFO Dav	David Lantz	10601 Belcher Road South	
		Seminole, FL 33777	■Remove
			□Add
		<u></u>	□Remove
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Note:	tive date, if other than the date of filing:
ne record ord is fi	rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the ded.
Dated	May 25 2021
	Signature of a membe Cor authorized representative of a member
	James Bridgeforth

Filing Fee: \$25.00