

L10000053047

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

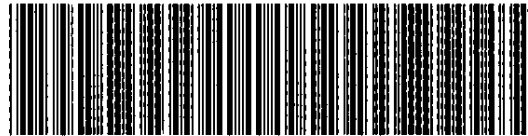
Special Instructions to Filing Officer:

A. LUNT

JUN -9 2010

EXAMINER

Office Use Only



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06/07/10--01017--020 **55.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2010 JUN -7 AM 10:54

FILED

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Solar Selection Energy Projects and Solutions
Name of Limited Liability Company GROUP LLC

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

BRANDEN HERTZ
Name of Person
SOLAR SELECTION
Firm/Company
2065 Riverland Rd
Address
Fort Lauderdale, FL, 33312
City/State and Zip Code
Branden@Solarselection.com
E-mail address: (to be used for future annual report notification)

RECEIVED MAY 27 2010
TALLAHASSEE, FLORIDA

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For further information concerning this matter, please call:

Branden at (954) 325-5301
Name of Person 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**

SOLAR SELECTION ENERGY PROTECTS AND SOLUTIONS GROUP
(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) LLC

The Articles of Organization for this Limited Liability Company were filed on MAY 17, 2010 and assigned
Florida document number L10000053047

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 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)

1600 NE 12 TERRACE
Ft. Lauderdale
FL, 33305

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

8065 Riverland Rd
Ft. Lauderdale,
FL, 33312

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:

1600 NE 12 TERRACE

Enter Florida street address

FT. LAUDERDALE

City

FL, 33305

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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

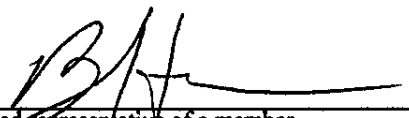
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

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		_____	<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.)*

Dated _____, _____



 Signature of a member or authorized representative of a member

 Typed or printed name of signee
 Brandon Hertz