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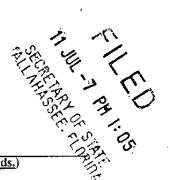
JUL - 8 2011

EXAMINER

COVER LETTER

TO:	Registration Division of C		,	•
SUBJECT. STEINCO			O IMPORTS LLC	
			ited Liability Company	
		· · · · · · · · · · · · · · · · · · ·		
The en	closed Articles	of Amendment and fee(s) are su	bmitted for filing.	'a
Please	return all corres	pondence concerning this matte	r to the following:	THE TARY OF STATE
LISA CASTRO			25.55 Jan 1	
			Name of Person	707
1 \$7			TOP LEGAL SERVICES	95 05
			Firm/Company	
941			11 S MILITARY TR, F3	
			Address	
	·····			
		LISA@1S	STOPLEGALSERVICES.CC to be used for future annual report notifi	DM (cation)
For fur	ther information	concerning this matter, please	•	·
LISA CASTRO Name of Person			at (561) Area Code & Daytime	478-7441
Enclose	ed is a check for	the following amount:		
\$25.	.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 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		stration Section tion of Corporations Box 6327	STREET/COURII Registration Section Division of Corpora Clifton Building 2661 Executive Cer Tallahassee, FL 323	n ations nter Circle

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**



STEINCO IMPORTS 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	06/02/2010	and assigned
Florida document number L1000005	59160			
This amendment is submitted to amend the fo	llowing:			
A. If amending name, enter the new name	of the limited liabi	lity company here	2:	
ENERGY	Y SAVINGS SOI	LUTIONS USA	LLC	
The new name must be distinguishable and end w "L.L.C."	vith the words "Limit	ed Liability Compa	ny," the designation "L	LC" or the abbreviation
Enter new principal offices address, if appli	icable:	N/A		
(Principal office address MUST BE A STRE	ET ADDRESS)			
•				
Enter new mailing address, if applicable:		N/A		
(Mailing address MAY BE A POST OFFICE BOX)			· · · · · · · · · · · · · · · · · · ·	
B. If amending the registered agent and registered agent and/or the new registered of	office address here		ur records, <u>enter t</u>	he name of the new
Name of New Registered Agent:	N/A			
New Registered Office Address:			- · · · · · · · · · · · · · · · · · · ·	·
		Enter Florida street address		
		, Florida		
	,	City		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

MGRW =	Managing Member		•
Title	<u>Name</u>	Address	Type of Action
	N/A	·	AddRemove
	.		Add ☐ Remove
		,	
	· · · · · · · · · · · · · · · · · · ·		
	 		F-4.2
		· · · · · · · · · · · · · · · · · · ·	<u>—</u> n
D. If amer	ding any other information, e	nter change(s) here: (Attach additional sheets,	
· <u> </u>			
· _			
Dated	JUNE 30TH		JUL -7 PM
	Signature	of a member or authorized representative of a member LISA CASTRO	F STATE
		Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00