## 110000063298

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
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## **COVER LETTER**

	Registration Section Division of Corporations						
SUBJE	,	nergy Group, LLC d Liability Company					
Dear Si	r or Madam:						
The end	closed Registered Agent/Registered (	Office C	Change and fee(s) are submitted for filing	·,•			
Please 1	return all correspondence concerning	this ma	natter to the following:				
	Gregory Phillips						
	Name of Person						
	MGH Paige & Associates, LI Firm/Company	<u>.c</u>	<del></del>				
	PO BOX 10923 Address						
	Tampa, FL 33679 City/State and Zip Code						
Е-п	greg@mghpaige.com nail address: (to be used for future annual report r	otification	ion)				
For fur	ther information concerning this matt	er, plea	ease call:				
	Gregory Phillips	_ at (	813 ) 333 6764				
	Name of Person		Area Code & Daytime Telephone Number				
	STREET/COURIER ADDRESS:		MAILING ADDRESS:				
	Registration Section		Registration Section				
	Division of Corporations		Division of Corporations				
	Clifton Building 2661 Executive Center Circle		P.O. Box 6327 Tallahassee, Florida 32314				
	Tallahassee, Florida 32301		Talianassee, Florida 32314				
Enclosed is a check for the following amount:							
	\$25 Filing Fee		\$55 Filing Fee & Certified Copy				

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

→ <del>***</del>					
A. If amending name, enter the new name of the limited liability company here:  Prudent Services Group, LLC  The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the ab "L.L.C."  Enter new principal offices address, if applicable:  (Principal office address MUST BE A STREET ADDRESS)  Odessa, FL 33556	gned				
Prudent Services Group, LLC  The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the at "L.L.C."  Enter new principal offices address, if applicable:  (Principal office address MUST BE A STREET ADDRESS)  Odessa, FL 33556					
The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the at "L.L.C."  Enter new principal offices address, if applicable:  (Principal office address MUST BE A STREET ADDRESS)  Odessa, FL 33556					
"L.L.C."  Enter new principal offices address, if applicable:  (Principal office address MUST BE A STREET ADDRESS)  Odessa, FL 33556					
(Principal office address MUST BE A STREET ADDRESS)  6908 Angel Farm Drive  Odessa , FL 33556	obreviation				
Odessa , FL 33556	<del> </del>				
Odessa , FL 33330 Sept. 2					
· · · · · · · · · · · · · · · · · · ·	i g				
	د در در معاملات				
Enter new mailing address, if applicable: P.O. Box 10923					
(Mailing address MAY BE A POST OFFICE BOX) Tampa, FL 33679	* *				
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B. If amending the registered agent and/or registered office address on our records, enter the name of registered agent and/or the new registered office address here:	the new				
Name of New Registered Agent:					
New Registered Office Address:					
Enter Florida street address	Enter Florida street address				
, Florida	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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager

MGRM = Managing Member					
<u>Title</u>	<u>Name</u>	Address	Type of Action		
			Add Remove		
			Add Remove		
			Add Remove		
			Add Remove		
			Add Remove		
			Add Remove		
D. If amend	ding any other information, enter chang	ge(s) here: (Attach additional sheets, if necessar)	19 NOV 15 15 ISIN		
 Dated	man	018			
		or authorized representative of a member			
	Турес	Gregory Phillips d or printed name of signee			

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Filing Fee: \$25.00