

(Re	equestor's Name)				
(Ad	ldress)				
(Ad	ldress)	· · · · · · · · · · · · · · · · · · ·			
(City/State/Zip/Phone #)					
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G. MCLEOD

NOV 28 2011

EXAMINER



500213497125

10/31/11--01007--024 **25.00

COVER LETTER

TO:	Registration Section Division of Corporation				
SUBJI	ECT:	Rotation F	Renewables, LLC		
		Name of Limi	ted Liability Company		
The en	closed Articles of Am	endment and fee(s) are sub	omitted for filing.		
Please	return all corresponde	ence concerning this matter	to the following:		
			Reed Clary		
			Name of Person		
Rotation Renewables, LLC					
Firm/Company					
1755 N. Highway A1A, Suite 202					
	•		Address		
		I	ndialantic, FL 32903		
	City/State and Zip Code				
	-	rclary@	Orotationrenewables.com	ification)	
For fu	ther information conc	erning this matter, please c			
		d Clary	at (_407) Area Code & Dayti	666-1448	
	Name of Pe	rson	Area Code & Dayti	me Telephone Number	
Enclos	ed is a check for the fe	ollowing amount:			
\$25	6.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)		f Status &

MAILING ADDRESS:

TO:

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

ROTATION CORPORATION

November 7, 2011

Florida Department of State Division of Corporations Corporate Filings P.O. Box 6327 Tallahassee, FL 32314

Re: Authorization and Consent to Use of Name by Rotation LLC (f/k/a Rotation Renewables, LLC).

Dear Sir or Madam,

Please accept this letter as the authorization and consent of Rotation Corporation to the amendment filed by Rotation Renewables, LLC to change its name to Rotation LLC, and the use of this name.

Please contact me at (407) 810-6632 with any further questions regarding this matter. Thank you.

Sincerely,

Chairman and Incorporator

Rotation Corporation

11 NOV 23 PM 3: 56
SECRETARY OF STATE

ROTATION RENEWABLES, LLC

November 7, 2011

Florida Department of State Division of Corporations Corporate Filings P.O. Box 6327 Tallahassee, FL 32314

Re: Amendment to change name from Rotation Renewables, LLC to Rotation LLC.

Dear Sir or Madam,

We recently received notice of return of our filed amendment documents to change the name of the company from "Rotation Renewables, LLC" to "Rotation LLC". Pursuant to my conversation with Division of Corporations personnel, enclosed with this letter please find:

- A signed copy of the amendment and the notice letter we received from the Department of State.
- A signed authorization and consent letter from Rotation Corporation, an affiliate of Rotation Renewables, to the amendment filed to change the name to "Rotation LLC" and the use of such name.

Please contact me at (407) 666-1448, or rclary@rotationrenewables.com, with any further questions regarding this matter. Thank you.

Sincerely,

Reed Clary

General Counsel

Rotation Renewables, LLC

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SECRETARY OF STATE

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

F	Rotation Renewables	s, LLC			
(Name of the Limite	ed Liability Company as it no A Florida Limited Liability Co	w appears on our records.) empany)			
The Articles of Organization for this Limited	Liability Company were filed	I on 9/9/2010	and assigned		
Florida document number L1000009	94717				
This amendment is submitted to amend the fo	llowing:				
A. If amending name, enter the new name	of the limited liability comp	oany here:			
	Rotation LLC				
The new name must be distinguishable and end will.L.C."	vith the words "Limited Liabilit	y Company," the designation	"LLC" or the abbreviation		
Enter new principal offices address, if appl	icable: N/A				
(Principal office address MUST BE A STRE	ET ADDRESS)				
			_ Z ç;_=		
			AAR 6		
Enter new mailing address, if applicable:	N/A		*** **********************************		
(Mailing address MAY BE A POST OFFICI	<u> </u>		Section 2		
		· · · · · · · · · · · · · · · · · · ·	<u> </u>		
B. If amending the registered agent and			Si Si C		
B. If amending the registered agent and registered agent and/or the new registered of the new registered agent and new registered agent agen	l/or registered office addre	ess on our records, <u>enter</u>	the Hame of the new		
registered agent and/or the new registered	onice address nere.				
Name of New Registered Agent:	N/A				
New Registered Office Address:	N/A		····		
		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 ameriding 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 **Title Type of Action** Name **Address** ___ Add Remove ☐ Add Remove Add Remove Add Remove Remove ∏Add Remove . D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) N/A Dated Nevember 7, 2011 Signature of a member or authorized representative of a member Reed Clary Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00