## 110000/00036

(Requestor's Name)
(Address)
·
(Address)
(City/State/Zip/Phone #)
, , , , ,
PICK-UP WAIT MAIL
<del></del>
(Dusings Falib Alama)
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
·

Office Use Only



800255285328

01/21/14--01021--028 \*\*30.00

SECRETARY OF STATE

JAN 2 7 2013 T. HAMPTON

## **COVER LETTER**

TO: Registration Section
Division of Corporations

SUBJECT: Global Energy Systems

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:

Richard C. McMillan

Name of Person

**GES** 

Firm/Company

9937 50th st. cir. e

Address

Parrish/FI 34219

City/State and Zip Code

clay@gesfla.com

. E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Richard McMillan

ູ,941、224-5075

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

Global Energy Systems			
(Name of the Limited Liability Comp (A Florida Limited	any as it now appears on our rec	cords.)	
(A Florida Limited	Liability Company)	2014 SE( TAL	
The Articles of Organization for this Limited Liability Compar	ny were filed on 09/27/2010	⇒ ≥ and essigned	
Florida document number 273619809 LIDC	000100836	N 2	
Tiorida document number	,00 °0000	SSE 21	
mit to the ball of the ball of			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited lis	ability company here:	8: 52 STATE Lerida	
		) A	
The new name must be distinguishable and end with the words "Liu"L.L.C."	mited Liability Company," the desi	ignation "LLC" or the abbreviation	
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)		<del></del>	
Trucpu office univess most be A STREET ADDRESS			
Entan non-mailing address if applicables	PO Box 788		
Enter new mailing address, if applicable:	Ellenton, FL. 34222		
(Mailing address MAY BE A POST OFFICE BOX)	Elleritori, FL. 34222		
D 16	e 11 1		
B. If amending the registered agent and/or registered registered agent and/or the new registered office address he		s, enter the name of the new	
Together and of the new Together of the audition in	<u> </u>		
Nama of Naw Basistanad Assauts			
Name of New Registered Agent:		<del>-</del>	
New Registered Office Address:			
	Enter Florida street address		
	,F	lorida	
	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 60%, 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 **Address Type of Action Title** Name 6215 east sawgrass rd Kenneth D. Miller **MGRM** Sarasota, Fl. 34240 Remove 52 Remove Remove

D. If ar	nending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
ated A	August 1st 2013
	Rightsure of a member or authorized representative of a member
	Richard C. McMillan
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

FILED
2014 JAN 21 AM 8: 52
SECRETARY OF STATE