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| (Requestor's Name) |
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| (City/State/Zip/Phone #) |
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| PICK-UP WAIT MAIL |
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| (Business Entity Name) |
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| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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T. CLINE

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EXAMINER

August 23, 2011

JEFFREY PLANT 21568 NW 142 AVE HIGH SPRINGS, FL 32643

SUBJECT: HAMILTON ENERGY COMPANY, LLC

Ref. Number: L11000026020

We have received your document for HAMILTON ENERGY COMPANY, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6020.

Tammi Cline Regulatory Specialist II

Letter Number: 011A00019701

FILED

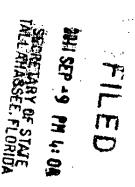
COVER LETTER

| TO: Registration Section Division of Corporations | | | | | |
|--|--|--|--|--|--|
| SUBJECT: Hamilton Energy Company LLC. 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: | | | | | |
| Jeffrey H. Plant Name of Person | | | | | |
| Hamilton Energy Company, LLC. | | | | | |
| 21568 NW 142 AUE Address | | | | | |
| High Springs F1. 32643 City/State and Zip Code Jeff here @ gmail com E-mail address: (to be used for future annual report notification) | | | | | |
| For further information concerning this matter, please call: | | | | | |
| Teffry H. Plant at (352) 494-4877 Name of Person Area Code & Daytime Telephone Number | | | | | |
| Enclosed is a check for the following amount: [2] \$25.00 Filing Fee | | | | | |

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

| (Name of the Limited Liability (| Company as it now appears on mited Liability Company) | our records.) |
|---|---|---|
| The Articles of Organization for this Limited Liability Col | mpany were filed on Mass | nd assigned |
| This amendment is submitted to amend the following: | | |
| A. If amending name, enter the new name of the limit | ed liability company here: | |
| The new name must be distinguishable and end with the words 'L.L.C." | s "Limited Liability Company," | the designation "LLC" or the abbreviation |
| Enter new principal offices address, if applicable: | | |
| Principal office address MUST BE A STREET ADDRE | <u></u> | P.O. S. |
| Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered agent and/or the new registered office addre | | records, enter the name of the new |
| Name of New Registered Agent: | ass nere: | |
| | | |
| New Registered Office Address: | Enter I | 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 MGRM = Managing Member

| <u>Title</u> | <u>Name</u> | Address | Type of Action |
|---------------|---|---|----------------|
| MGRM | Joseph Zambic | 1286 Brooks Ford Lawrenceville, Ca. 30045 | Add Zeremove |
| | | | Add Remove |
| | | | Add Remove |
| | | | Add Remove |
| <u>_</u> | | | Add Remove |
| | | | Add Respoye |
| D. If amend | ing any other information, enter change | e(s) here: (Attach additional sheets, if necessar | SSEE. FLORIDA |
| | | | OF CONTRACTOR |
| Dated & - | -31 - 11 | | |
| | Signature of a member | or authorized representative of a member | |
| - | Jeffrey H. Plant Typed o | or printed name of signee | |

Page 2 of 2

Filing Fee: \$25.00