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COVER LETTER

TO: Registration Section Division of Corporations

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Energy Subsea LLC

SUBJECT: ____

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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:

Oddgeir Ingvartsen

Name of Person

Firm/Company

1415 S Voss Rd - STE 110-178

Address

Houston / Texas / 77057

City/State and Zip Code

oi@energysubsea.com

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

310

For further information concerning this matter, please call:

Oddgeir Ingvarsen

Name of Person

at (_____) _ Area Code

a Code Daytime Telephone Number

3592001

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)

<u>Mailing Address:</u> Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 <u>Street Address:</u> Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Energy Subsea LLC		
(<u>Name of the Limited Li</u> (A F	iability Company as it now appears on our records.) Iorida Limited Liability Company)	
The Articles of Organization for this Limited Liabil Florida document number	ity Company were filed on	and assigned
This amendment is submitted to amend the followir	ng:	
A. If amending name, <u>enter the new name of the</u> Gulf Project LLC		
The new name must be distinguishable and contain the words	s "Limited Liability Company," the designation "LLC" (or the abbreviation "L.L.C."
Enter new principal offices address, if applicable	e:	<u> </u>
(Principal office address MUST BE A STREET A	DDRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO.	<u></u>	
B. If amending the registered agent and/or registered agent and/or the new registered office address h Name of New Registered Agent:	stered office address on our records, <u>enter ti</u> <u>ere</u> :	
New Registered Office Address:	Enter Florida street address	 د.، س
		,
-	Flo	ridaZip Code

New Registered Agent's Signature, if changing Registered Agent:

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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 605, 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 amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	<u>Address</u>	Type of Action
			□ Add
			Change
		. <u> </u>	🖸 Add
			Change
			□ Add
			Remove
			□Change
			🗆 Add
			□Change
			🗆 Add
			Change
			🗆 Add

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

	03,18,2021
Dated	
	Odden Ingel
	Signature of a member or authorized representative of a member

Oddgeir Ingvartsen