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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: America's Consumer Energy Solution S 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:
Maisa Marie Name of Person
America's Consumer Energy Solutions
14264 PUSSIN Ct.
Clear Water, FL-33762 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
WAIL MARI at (727) 215 05 65 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 Certified Copy (additional copy is enclosed) \$60.00 Filing Fee, 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

SECRETARY OF STATE DIVISION OF CORPORATIONS

11 JUL 27 PM 12: 23

(Name of the Limited	Onsumer Energy Solutions LLC Liability Company as it now appears on our records.) A Florida Limited Liability Company)
The Articles of Organization for this Limited L Florida document number L160083	
This amendment is submitted to amend the following	owing:
A. If amending name, enter the new name of	f the limited liability company here:
The new name must be distinguishable and end win "L.L.C."	th the words "Limited Liability Company," the designation "LLC" or the abbreviation
Enter new principal offices address, if applic	able:
(Principal office address MUST BE A STREE	T ADDRESS)
Enter new mailing address, if applicable:	·
(Mailing address MAY BE A POST OFFICE	BOX)
B. If amending the registered agent and/or the new registered of	or registered office address on our records, enter the name of the new ffice address here:
Name of New Registered Agent:	Maisa marie
New Registered Office Address:	475 Central Ave BIO4
	Enter Florida street address
	St tete, Florida 3370
	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.

The Changing Registered Agent, Signature of New Registered Agent

MGR = Manager MGRM = Managing Member **Title** Name Address **Type of Action** Richard Sanders M6Rm ☐ Add Remove ∏ Add ☐ Remove Add Remove □Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Signature of a member or authorized representative of a member Typed or printed name of signee

- If smending 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:

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Filing Fee: \$25.00