

L120000024663

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

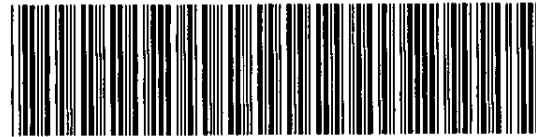
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. SAULSBERRY
EXAMINER

MAY 22 2012

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: TIDEWATER POWER 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:

DAMIAN AMUSO

Name of Person

TIDEWATER POWER LLC

Firm/Company

777 S. FLAGLER DRIVE, SUITE 800

Address

WEST PALM BEACH, FL 33401

City/State and Zip Code

bookkeeping92@gmail.com

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

For further information concerning this matter, please call:

DAMIAN AMUSO

Name of Person

at (954)

270-1590

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

TIDEWATER POWER LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 02/21/2012 and assigned
Florida document number L12000024663.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

777 S FLAGLER DRIVE SUITE 800

WEST PALM BEACH, FL 33401

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: DAMIAN AMUSO

New Registered Office Address: 777 S FLAGLER DRIVE SUITE 800

Enter Florida street address

WEST PALM BEACH, Florida

33401

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.

Damian Amuso
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

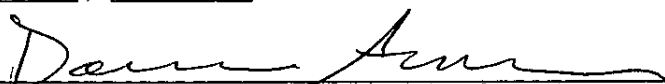
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	WESLEY CAMERON	1699 S FEDERAL HWY STE 200 BOCA RATON, FL 33432	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	Tidewater Smart Energy LLC	777 S FLAGLER DRIVE STE 800 WEST PALM BEACH, FL 33401	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGR	ENERGO PROJECT LLC	4118 OYSTER POND WAY JUPITER, FL 33458	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Dated MAY 17, 2012.



Signature of a member or authorized representative of a member

DAMIAN AMUSO

Typed or printed name of signee