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PICK-UP	WAIT	MAIL		
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September 18, 2018

RUBEN D. RAMIREZ 801 S YONGE STREET, SUITE 4-A ORMOND BEACH, FL 32174

SUBJECT: G4 ENERGY SOLUTIONS LLC

Ref. Number: L12000093914

We have received your document for G4 ENERGY SOLUTIONS LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

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) 245-6051.

Deborah Bruce Corporate Records Supervisor

2010 SEP 24 AM II: 3
INCLARASSEE FLORE

Letter Number: 418A00019444

COVER LETTER

TO: Registration Section Division of Corporations

INHS18 (2/14)

SUBJECT: G-4 €	NERGY S	SOWTIONS, LLC	
30007.01.	Name of 1	Limited Liability Company	
Dear Sir or Madam:			
The enclosed Registered Agent/Re	gistered Office Cl	hange and fee(s) are submitted for filing.	
Please return all correspondence co	oncerning this made	itter to the following:	
RUBEN D	. RAMÎ	ÎREZ.	
Name of f			
Firm/Con	ipany		
801 S. Yav	19e ST.	suite-4-A	
Address	;		
ORMOND B	EACH FL	L 32174	
G-4evergy 50 E-mail address: (to be used to	Jutions Q	control k. com	
For further information concerning			
Adelson Ramo	\	1(386) 212 5967	201 521
Name of Person		Area Code & Daytime Telephone Number	2010 SEP
STREET/COURIER AL Registration Section	DDRESS:	MAILING ADDRESS: Registration Section	\$2 4
Division of Corporations		Division of Corporations P.O. Box 6327	
Clifton Building 2661 Executive Center Cl Tallahassee, Florida 3230		Tallahassee, Florida 32314 €	55 H 36
Enclosed is a check for t	the following am	ount:	 −
□ \$25 Filing Fee		☐ \$55 Filing Fee & Certified Copy	

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605,0114 or 605,0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

_ (b) <u>~</u>	Mailing address of limited hability company. (Note: MAY RE POST OFFICE BON)
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<u>Hice address</u>	· 24 \$\$\$!
NEW Registered Office Address:	
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2174	
ic registered ility compa the limited mited liabil	e of Florida, it is hereby confirmed that after doffice and the business office of the registering, it is hereby confirmed that the change(s) liability company or as otherwise provided in ity company.
	Printed or typed name of signee
	2174 Direct address 2174 Of the State of registere lifty comparing the limited mited habit