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APR - 2 2014 T CLINE 2014 MAR 31 PM 2: 57 SECRETARY OF STATE TALLAHASSEE, FLORID

COVER LETTER

TO: Registration S Division of Co				
SUBJECT: Califo	rnia Alternative E	Energy Regional Ce	enter LLC	
SUBJECT.	Name of Lin	ited Liability Company	, , , , , , , , , , , , , , , , , , , ,	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please return all corresp	ondence concerning this matter	to the following:		
	Rebecca Ma	alka		
		Name of Person		
		Firm/Company		
	1200 Bricke	ll Ave., Suite 19	50	
	Miami, FL 3	3131		
		City/State and Zip Code		
	rmalka@patagor		28 28	
For further information of	e-man address: (to be used for future annual report noti all:	SECRETARY ALLAHASSE	ALATTASY.
Jennifer Lo	pez	_{at} 305, 961-1	D90 21 1	ja 1 ares krasjar
	of Person	Area Code Daytim	e Telephone Number	Control of the second
Enclosed is a check for t	_			
■ \$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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

California Alternative Energy Regional Center 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 8/15/2012 and assigned Florida document number _L12000105561 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: ARCG California Regional Center LLC 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) 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: Rebecca Malka Name of New Registered Agent: 1200 Brickell Ave., Suite 1950 New Registered Office Address: Enter Florida street address , Florida <u>33131</u> Miami City 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 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 Changing Registered Agent, Signature of New Registered Agent Page 1 of 3

If amending the Managers or Authorized Member on our records, <u>enter the title, name, and address of each Manager or Authorized Member being added or removed from our records</u>:

MGR = M $AMBR = A$	lanager Authorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
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the date this docu Dated Marc	•	the Florida Department	2014				
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