L13000016144

| (Req | uestor's Name) | |
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| (City/ | /State/Zip/Phon | e #) |
| PICK-UP | ☐ WAIT | MAIL |
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| Certified Copies | Certificate | s of Status |
| Special Instructions to F | iling Officer: | |
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Office Use Only



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| Division of Co | | , | |
|---------------------------------|---|---|---|
| TiRC Ener | gy Engineering - International, | Professional Limited Liability Con | npany |
| | Name of Lin | nited Liability Company | |
| The enclosed Articles of | Amendment and fee(s) are sub | omitted for filing. | |
| Please return all correspondent | ondence concerning this matter | to the following: | |
| | Theron C. Colbert, P.E. | | |
| | | Name of Person | |
| | TiRC Energy Engineering | - International, Professional Limite | ed Liability Compa |
| | | Firm/Company | |
| | 1232 Matengo Circle | | |
| | | Address | |
| | Jacksonville, FL 32259-8 | | |
| | | City/State and Zip Code | |
| | CEO@TRCEnergy.com | | |
| | E-mail address: (| to be used for future annual report notif | ication) |
| For further information c | concerning this matter, please c | all: | |
| Theron C. Colbert, P.E. | | 904 576-0112 at () | |
| Name o | f Person | Area Code Daytime | Telephone Number |
| Enclosed is a check for the | he 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



FLORIDA DEPARTMENT OF STATE Division of Corporations

November 5, 2015

THERON C COLBERT 1232 MATENGO CIRCLE JACKSONVILLE, FL 32259-8008

SUBJECT: TIRC ENERGY ENGINEERING, INTERNATIONAL-

PROFESSIONAL LIMITED LIABILITY COMPANY

Ref. Number: L13000016144

We have received your document for TIRC ENERGY ENGINEERING, INTERNATIONAL-PROFESSIONAL LIMITED LIABILITY COMPANY and your check(s) totaling \$60.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Entities may file using only the entity's name. <u>Please delete any reference</u> to the "doing business as name" in your document. If you wish to register your fictitious name, you may do so by filing an application and submitting the appropriate fees to this office.

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.

Jenna D Harris Regulatory Specialist II

Letter Number: 415A00023480



ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| (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 L13000016144 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: | and : | assign | ed |
|---|--------------|-------------|-------------|
| Florida document numberL13000016144 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: | and : | assign | ed |
| This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: | | | |
| A. If amending name, enter the new name of the limited liability company here: | | | |
| | | | |
| | 700 | ? | |
| TRC Energy Engineering, Professional Limited Liability Company (dBA: TRC Energy Engineering, Endess | ing TLC) | _ | |
| The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the | abbreviation | "L.L.C. | ,, |
| Enter new principal offices address, if applicable: SAME AS ABOVE | | | |
| (Principal office address MUST BE A STREET ADDRESS) | | | |
| | <u> </u> | 2 | |
| Enter new mailing address, if applicable: SAME AS ABOVE | 二 注 注 | AON 9 | empe |
| (Muiling address MAY BE A POST OFFICE BOX) | | -1 | <u> </u> |
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| | 22 X | | : |
| P. If amending the registered agent and/or registered office address on our records, enter registered agent and/or the new registered office address here: | r the nam | e of | the nev |
| Name of New Registered Agent: | | _ | |
| New Registered Office Address: | | | |
| Enter Florida street address | | | |
| , Florida | Zip Coa | · | |
| New Registered Agent's Signature, if changing Registered Agent: | Zip Coa | e. | |

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

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

| Title | uthorized Member <u>Name</u> | <u>Address</u> | Type of Action |
|-------------|------------------------------|----------------|-----------------|
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| ffective date, if other than the date of file an effective date is listed, the date must be specified tote: If the date inserted in this block does no ocument's effective date on the Department of the effective date of the Department of the effective date of the e | e and cannot be prior to date of filing or most meet the applicable statutory filing of State's records. Ye date, but not an effective to | g requirements, this date | will not be listed |
| November 2 | 2015 | | |
| Pated November 2 | | | _ |
| Signature o | of a member or authorized representative | Cloed & F | Safe NO |
| | Theron C. Colbert, P.E. | | HAS |
| | Typed or printed name of signee | | 7 - 7 - 7 - 7 - 7 - 7 - 7 - 7 - 7 - 7 - |
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Filing Fee: \$25.00