L13000073706

(Re	questor's Name)	_
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PICK-UP	■ WAIT	MAIL
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SECRETARY OF STATE

APROFICIE J. HARRIS

COVER LETTER

	gistration Sec vision of Corp			
SUBJECT:	The Solar D	ivision, LLC		
			ited Liability Company	
The enclose	d Articles of A	mendment and fee(s) are sub	mitted for filing.	
Please return	n all correspon	dence concerning this matter	to the following:	
		Indre Clegg		
			Name of Person	
		The Solar, Division, LI	LC	
			Firm/Company	
		37227 Grassy Hill Ln		
			Address	
		Dade City, FL 33525		
			City/State and Zip Code	
		idishka@gmail.com		
		E-mail address: (to be used for future annual report notif	neation)
For further i	information co	ncerning this matter, please ca	ali:	
Indre C	legg		at (727) 686-7543	
	Name of	Person	Area Code Daytime	e Telephone Number
Enclosed is	a check for the	following amount:		
ૐ \$25.00 1	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

The Solar Division, L				
(<u>Name of the Limi</u>	ted Liability Compar (A Florida Limited L	ny as it now appears on iability Company)	our records.)	
he Articles of Organization for this Limited L	iability Company	were filed on <u>5/20/</u>	2013	and assigned
lorida document number L13000073706	·			
his amendment is submitted to amend the foll	owing:			
. If amending name, enter the new name o	f the limited liabi	lity company here:		
N/A				
he new name must be distinguishable and contain the v	vords "Limited Liabili	ty Company," the desig	nation "LLC" or the	abbreviation "L.L.C."
Inter new principal offices address, if applic	able:	N/A		100
Principal office address MUST BE A STREE	ET ADDRESS)			
				N.S.
nter new mailing address, if applicable:		N/A		PR T
	DOW)	·		· 第二
Mailing address MAY BE A POST OFFICE	<u>BUX)</u>			77 7 11
				őg e J
If amonding the registered agent and	lan marietaned of	G.,		
 If amending the registered agent and egistered agent and/or the new registered or 			ir records, <u>ente</u>	r-the name of the
		•		
Name of New Registered Agent:	_Indre Clegg			
New Registered Office Address:	37227 Grassy	Hill Ln		
		Enter Florida .	street address	
	Dade City		, Florida	33525
		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 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:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
President	Indre Clegg	37227 Grassy Hill Ln	☑ Add
		Dade City, FL 33525	☐ Remove
			☐ Change
Secretary	Joshua Hubbard	37227 Grassy Hill Ln	t ☑ Add
		Dade City, FL 33525	□ Remove
			Change
			□ Add
			☐ Remove
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			Change

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ffectiv If th	late, if other than the date of filing: 3/30/2016 (optional) c date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605. e date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed
ffectiv If th	e date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.
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ffective If the ment's second	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earliesth day after the record is filed. Signature of a member or authorized representative of a member
ffective If the ment's	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earliesth day after the record is filed. Signature of a member or authorized representative of a member

Filing Fee: \$25.00