## L13000674148

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(Address	)
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## COVER LETTER

TO				
~*	YD LD COD	Fast Pov	ver Solutions LLC	
SU	JBJECT:	Name of Limited Liability Company  If Articles of Amendment and fee(s) are submitted for filing.  If all correspondence concerning this matter to the following:    Abihail Ventura		
Th	ne enclosed Articles of	Articles of Amendment and fee(s) are submitted for filing.  Abihail Ventura  Name of Person  Fast Power Solutions LLC  Firm/Company  226 N Nova RD # 345  Address  Ormond Beach FL 32174  City/State and Zip Code abbyventura30@yahoo.com  E-mail address: (to be used for future annual report notification)  information concerning this matter, please call:  Abihail Ventura 276 920-0838		
Ple	ease return all corresp	ondence concerning this matter	to the following:	
			Abihail Ventura	
			Name of Person	
			Fast Power Solutions LLC	
		<del> </del>	Firm/Company	
			226 N Nova RD # 345	
			Ormond Beach FL 32174	
			•	<del></del>
				ication)
Fo	r further information			Nation,
Abihail Ventura				
	Name	of Person	Area Code Daytime	Telephone Number
En	closed is a check for t	the following amount:		
8	\$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

Fast Power Solutions LLC		
( <u>Name of the Limited Liability Company</u> ; (A Florida Limited Liab	as it now appears on our records.) ility Company)	
The Articles of Organization for this Limited Liability Company we Florida document numberL13000074148	ere filed on	and assigned
This amendment is submitted to amend the following:		2 <b>9</b>
A. If amending name, <u>enter the new name of the limited liabilit</u>	y company here:	JUL 28
he new name must be distinguishable and contain the words "Limited Liability	Company," the designation "LLC" of	
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:		
Mulang dadress MAT BE A POST OF FICE BOX		
B. If amending the registered agent and/or registered office egistered agent and/or the new registered office address here:	e address on our records, g	enter the name of the ne
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Flori	Zin 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
MGR	Luis A. Sanchez	226 N Nova RD	
		# 345	■ Remove
		Ormond Beach FL 32174	Change
		<del></del>	🗖 Add
			□ Remove
			Change
			🗆 Add
			□ Remove
			Change
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			☐ Remove
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n effectiv	date, if other than e date is listed, the date ne date inserted in th	e must be specific	and cannot be pr	ior to date of filing			g.) Pursua	
	s effective date on the				iling requirem	enis, ins dae	c will ho	i oc nsted
	l specifies a dela			not an effectiv	e time, at 1	.2:01 a.m.	on the	e earlier
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The 90	th day after the		2015					
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The 90		Alubi Signature o	ail VI	thorized represent	, itive of a membe		<u>JII 2</u>	
		Signature o	of a member or au	thorized represents		7 ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) (		

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Filing Fee: \$25.00