L17000166464

| (Re | equestor's Name) | |
|-------------------------|--------------------|-----------------|
| (Ad | dress) | , |
| (Ad | ldress) | |
| (Cit | ty/State/Zip/Phone | = #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bu | siness Entity Nan | ne) |
| (Do | ocument Number) | |
| Certified Copies | _ Certificates | s of Status |
| Special Instructions to | Filing Officer: | |
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Office Use Only



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COVER LETTER

| TO: Registration Section Division of Corpo | | a in the same of t | ₹ p * |
|--|--|--|---|
| SWeet Sweet | water CK LLC | , | |
| | | ed Liability Company | |
| The enclosed Articles of Ar | mendment and fee(s) are subm | nitted for filing. | |
| | lence concerning this matter to | | |
| | Srinivas Mad | Idali | |
| | | Name of Person | |
| | | | |
| | 0007 Tax a T | Firm/Company | |
| | 9907 Tree To | ops Lake Road | |
| | | Address | |
| | Tampa, FL 3 | | |
| | lenergyplus@gmai | City/State and Zip Code | |
| | 97. — — | be used for future annual report notificat | ion) |
| For further information cor | ncerning this matter, please cal | II: | |
| Pavan Pedir | ·edla | _{at} ,813 _. 504000 | 2 |
| Name of I | Person | Area Code Daytime Te | elephone Number |
| | | | |
| Enclosed is a check for the | 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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| Sweetwater CK LLC | | | | |
|--|---|----------------------|---------------------|-------|
| (Name of the Limited Liability Company a (A Florida Limited Liab | s it now appears on our records.) lity Company) | | | |
| The Articles of Organization for this Limited Liability Company we. Florida document number L130001064464 | re filed on 07-28-2013 | and as | signed | I |
| This amendment is submitted to amend the following: | | | | |
| A. If amending name, enter the new name of the limited liability | company here: | | | |
| The new name must be distinguishable and end with the words "Limited Liability | Company," the designation "LLC" or the ab | breviation " | 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 registered agent and/or the new registered office address here: | e address on our records, <u>enter t</u> | the name | of th | e new |
| Name of New Registered Agent: | | | .;;= <u>=</u> | · |
| New Registered Office Address: | | | | |
| | Enter Florida street address | ./ <i>)</i> ^ | U 1 | |
| | , Florida | Zip,Code | <u>चिह्न</u> क्र | -:. |
| New Registered Agent's Signature, if changing Registered Agent: | C.i.y | zip,code 認言 四点 | : 90 : | h., |

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 the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager

AMBR = Authorized Member **Title** <u>Name</u> <u>Address</u> **Type of Action** Pavan Pediredla MGR 9907 Tree Tops Lake Road ■ Add Tampa FL 33626 □ Remove _□ Add ☐ Remove _□ Add ☐ Remove □ Add ≅⊓ Remove □ Add ☐ Remove

| | - |
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| Tective date, if other than the date of effective date must be specific, cannot be prior date this document is filed by the Florida Dep | or to date of receipt or filed date and cannot be more than 90 days after |
| effective date must be specific, cannot be prior date this document is filed by the Florida Dep | or to date of receipt or filed date and cannot be more than 90 days after |
| effective date must be specific, cannot be prio | or to date of receipt or filed date and cannot be more than 90 days after partment of State) |
| effective date must be specific, cannot be prior date this document is filed by the Florida Dep | or to date of receipt or filed date and cannot be more than 90 days after partment of State) |

Page 3 of 3

Filing Fee: \$25.00