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(Red	questor's Name)	_
(Add	dress)	
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(Cit	y/State/Zip/Phone	: #)
PICK-UP	WAIT	MAIL
(Bu:	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
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C. GOLDEN MAY 1 5 2020

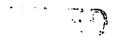
COVER LETTER

TO:	Registration Se Division of Cor		ď ;		
SUBJE		N POWER & GAS OF OHIO,	LLC		
ODGE		Name of Lim	ited Liability Company		
		Amendment and fee(s) are sub	-		
		Lisa Barry			
			Name of Person		
		American Power & Gas, L	LC		
			Firm/Company		
10601 Belcher Road South					
			Address		
		Seminole, FL 33777			
		regulatory@goapg.com	City/State and Zip Code		
			to be used for future annual report r	notification)	
For furt	her information c	oncerning this matter, please ca	all:		
Lisa B	arry		727 479-0731		
	Name o	f Person	Area Code Day	time Telephone Number	
Enclose	ed is a check for th	ne following amount:			
□ \$2;	5.00 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 Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street. Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



2020 A=2 30 PH 2: 5

AMERICAN POWER & GAS OF OHIO, 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 L	imited Liability Compa	ny were filed on 10/25/2013	and assigned
Florida document number L13000150		<u> </u>	<u></u>
Florida document number	,,		
This amendment is submitted to amen	d the following:		
A. If amending name, enter the new	v name of the limited li	ability company here:	
N/A			
The new name must be distinguishable and co	ontain the words "Limited Lia	ability Company," the designation	"LLC" or the abbreviation "L.L.C."
Enter new principal offices address,	if applicable:		
(Principal office address MUST BE)	4 STREET ADDRESS)	- 	
Enter new mailing address, if applie	cable:		
(Mailing address MAY BE A POST of	OFFICE BOX)		
B. If amending the registered agent	•	e address on our records, <u>c</u>	nter the name of the new registe
agent and/or the new registered offi	ce address nere:		
Name of New Registered As	gent:		
New Registered Office Add	·ess:		
		Enter Florida street o	address
			, Florida
		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 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 ador removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
AMBR	AP&G Holdings, LLC	10601 Belcher Road South	□ Add
		Seminole, FL 33777	□Remove
			\BChange .
			□Remove
			Change
			□Remove
			□Change
*****	·		□Add
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lf an effec <u>Note:</u> I	ve date, if other to ctive date is listed, the of the date inserted ent's effective date	e date must be speci in this block doe	cific and cannot be as not meet the	applicable state	filing or more that utory filing requ	(option in 90 days after fi uirements, this o	ling.) Pursuant to	605.020 listed a
e record rd is file	l specifies a delayed ed.	d effective date,	but not an effec	ctive time, at 12	2:01 a.m. on the	e earlier of: (b)	The 90th day a	ifter the
	29 April		2020					
Dated _	70	1/ -		_				
Dated 2	Cla	US Signatu	t <u>UUUU</u> ire of a memoer o	or authorized rep	resentative of a n	nember	_	-

Filing Fee: \$25.00