L13000150818

(Danus	satada Nama)		
(Reque	estor's Name)		
(Addre	ss)		
(Addre	ss)	•	
(City/S	tate/Zip/Phon	e #)	
PICK-UP	WAIT	MAIL	
(Business Entity Name)			
(Document Number)			
(200	,		
Certified Copies	Cortificator	r of Statue	
Certified Copies	Certificates	S Of Status	
Special Instructions to Filin	ng Officer:		

Office Use Only



900359578299

03/01/21--01024--007 **25.00

2022 HAY 27 AH 6: 30

O SIMMON:



April 29, 2021

LISA BARRY 10601 BELCHER RD S SEMINOLE, FL 33777

SUBJECT: AMERICAN POWER & GAS OF OHIO, LLC

Ref. Number: L13000150818

We have received your document for AMERICAN POWER & GAS OF OHIO, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a FOREIGN LLC, but your entity is a FLORIDA LLC. Please complete and return the enclosed blank form(s).

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) 245-6050.

Octavia L Simmons
Regulatory Specialist II Supervisor

Letter Number: 721A00008859

COVER LETTER

Registration Section

Division of Corporations

Tallahassee, FL 32314

TO:

AMERICA SUBJECT.	AN POWER & GAS OF OHIO	, LLC				
SUBJECT:	Name of Lim	ited Liability Company				
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.				
Please return all correspo	ondence concerning this matter	to the following:				
	Lisa Barry					
	·	Name of Person				
	AMERICAN POWER & 0	GAS, LLC				
	***************************************	Firm/Company				
	10601 Belcher Road South	1				
	Address					
	Seminole, FL 33777					
	City/State and Zip Code					
	regulatory@goapg.com	to be used for future annual report not	iifi.ortion)			
For further information c	concerning this matter, please of		meanony			
Lisa Barry	-					
	of Person	at () 479-0731 Area Code Daytir	ne Telephone Number			
Enclosed is a check for t	he following amount: \$25.00	already paid, please see attached I	Letter Number: 721A00008859			
☐ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Fiting Fee, Certificate of Status & Certified Copy (additional copy is enclosed)			
Mailing Addres Registration 5		<u>Street Address:</u> Registration Sc	ection			
Division of C		Division of Corporations				
P.O. Box 632	27	The Centre of Tallahassee				

2415 N. Monroe Street. Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

..:.[:] 2022 HAY 27 AH 6: 30

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 Limited Liability Company were filed on $\frac{11/01/2013}{}$ and assigned Florida document number _____L13000150818 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 contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "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 address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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.

City

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

AMBR = A	Authorized Member		2022 ITAY 27	AH 6: 30	
<u>Title</u>	<u>Name</u>	<u>Address</u>	FATT LIMI C. L.		Type of Action
CFO	David Lamz	10601 Belcher	Road South	· · ·	□Add
		Seminole, Fl. 3	3777		Remove
		<u>.</u> —			□Change
					□Add
		<u>-</u>			□Remove
					□Change
					□Add
			<u> </u>		Remove
					□Change
				<u></u>	□Add
					□Remove
				 -	□Change
			· · · · · · · · · · · · · · · · · · ·		□Add
					□Remove
		=			Change
		<u> </u>			🗆 Add
					□Remove
					🗆 Change

	
date, if other than the date of filing: ve date is listed, the date must be specific and cannot be prior to date of fil the date inserted in this block does not meet the applicable statute 's effective date on the Department of State's records.	(optional) ling or more than 90 days after filing.) Pursuant to 605.0207 ory filing requirements, this date will not be listed as a
pecifies a delayed effective date, but not an effective time, at 12:0	01 a.m. on the earlier of: (b) The 90th day after the
av 25	
ay 25 2021	
Signature of a member or authorized repres	sentative of a member
James Bridgeforth	

Filing Fee: \$25.00