L13000150955

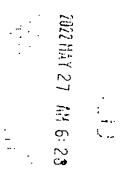
	(Requestor's Name)
	(Address)
	(Address)
	(City/State/Zip/Phone #)
PICK-UP	WAIT MAIL
	(Business Entity Name)
	(Document Number)
Certified Copies	Certificates of Status
Special Instructions	to Filing Officer:

Office Use Only



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03/01/21--01024--011 **25.00



O SIMMONS
JUN 0 9 2021



April 29, 2021

LISA BARRY 10601 BELCHER RD S SEMINOLE, FL 33777

SUBJECT: AMERICAN POWER & GAS OF NJ, LLC

Ref. Number: L13000150955

We have received your document for AMERICAN POWER & GAS OF NJ, 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: 321A00008860

2021 MAY 27 TULE

COVER LETTER

TO:

Tallahassee, FL 32314

TO: Registration Se Division of Cor			
AMERICA	IN POWER & GAS OF NJ, LL	.c	
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 & O	GAS, LLC	
		Firm/Company	
	10601 Belcher Road South	1	
		Address	<u> </u>
	Seminote, FI. 33777		
		City/State and Zip Code	
	regulatory@goapg.com		
		to be used for future annual report notif	lication)
For further information c	oncerning this matter, please ca	all:	
Lisa Barry		727 479-0731 at ()	
Name o	f Person	Area Code Daytime	: Telephone Number
Enclosed is a check for the	he following amount: \$25.00	already paid, please see attached Le	etter Number: 321A00008860
☐ \$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 Addres	<u>s:</u>	<u>Street Address:</u>	
Registration 5	Section	Registration Sec	
Division of C P.O. Box 632	•	Division of Corp The Centre of T	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF \$1020 km/s

PF 2022 HAY 27 AH 6: 28

AMERICAN POWER & GAS OF		•
(Name of the Limit	ed Liability Company as it now appears on or (A Florida Limited Liability Company)	ir records.)
The Articles of Organization for this Limited Li	ability Company were filed on 11/01/20	and assigned
lorida document number L13000150955	·	
his amendment is submitted to amend the follo	owing:	
A. If amending name, enter the new name of	the limited liability company here:	
he new name must be distinguishable and contain the w	ords "Limited Liability Company," the designat	ion "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applications	able:	
Principal office address MUST BE A STREE	T ADDRESS)	
Inter new mailing address, if applicable:		
<u>Mailing address MAY BE A POST OFFICE (</u>	<u></u>	
		
3. If amending the registered agent and/or re	ogistored office address on our record	s, enter the name of the new regis
gent and/or the new registered agent and/or		s, enter the name of the new regis
Name of New Registered Agent:		
New Registered Office Address:		
- 	Enter Florida stre	et address
		, Florida
	Сиу	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

AMDIX = 7	authorized Armoet	2022 HAY 21	Y 27 AH 6: 28 Type of Action		
Title	Name	Address			
CFO	David Lantz	10601 Belcher Road South	' □Add		
		Seminole, FL 33777	Remove		
			□Change		
			□Add		
			□Remove		
			Change		
			□Add		
			□Remove		
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ffective date, if other than effective date is listed, the	nan the date of I date must be specific	uing: : and cannot be pri-	or to date of filing	g or more than 90 d	_ (optional) lays after filing.) Purs	suant to 605.0207
Sote: If the date inserted i	n this block does n	ot meet the appl	icable statutory	filing requireme	ents, this date will	not be listed as
ocument's effective date of	on the Department	of State's record	IS.			
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record specifies a delayed f is filed.	effective date, but	not an effective	time, at 12:01	a.m. on the earth	er of: (b) The 90t	n day after the
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Pated May 25	/ /	2021	<i>'</i>	, /		
ancu	-/ 1/	/ `				
/	I / ζ	c, / '	1//			
/ /	12-111	` /				
	Signature (of a member or aut	horizoo tepresen	native of a member	······································	

Filing Fee: \$25.00