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COVER LETTER

Registration Section Division of Corporations

TO:

SUBJECT: Syner	gy Power Sol	utions USA	, LLC		
Pann	rgy Power Sol Name of Lim Cecle Every 9	ited Liability Company Solutions	Lhe		
	mendment and fee(s) are sub				
Please return all correspor	dence concerning this matter	to the following:			
	Anthony R.	Maul			
		Name of Person			
	Synergy Pov	wer Solution	ns USA, LL	_C	
		Firm/Company	·		
10950 Old South Way					
					
	RMaul@Synergy	'pwr.com to be used for future annual			
Ear further information as			report notification)		_
	ncerning this matter, please c				
Rudy Maul		$=$ $_{at}(239)7$	70-8393		
Name of	Person	Area Code	Daytime Telephone t	Number SSS 4	L S
Enclosed is a check for the	e following amount:				P (1)
■ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee Certified Copy (additional copy is en	closed) Ce	0.00 Filing Fee, Cortificate of Status & Cortified Copy dditional copy is enclosed	

MAILING ADDRESS: STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314
Clifton Building
Clifton Building
Tallahassee, FL 32301
Clifton Building
Tallahassee, FL 32301

ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION **OF**

the Audithor of Occordingly of Condition (Condition)					
The Articles of Organization for this Limited Liability Company Torida document number <u>L13000156982</u> .	were filed on 11/07/2013	and assigned			
his amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limited liab	sility company here:				
Synergy Power Solutions USA, LLC					
he new name must be distinguishable and end with the words "Limited Liah	oility Company," the designation "LLC" or th	e abbreviation "L.L.C."			
Inter new principal offices address, if applicable:	10950 Old South Way				
Principal office address MUST BE A STREET ADDRESS)	Fort Myers, Florida 33908	2014			
		AP AP			
Enter new mailing address, if applicable:	10950 Old South Way				
Mailing address MAY BE A POST OFFICE BOX)	Fort Myers, Florida 33908				
		3			
3. If amending the registered agent and/or registered of egistered agent and/or the new registered office address here		***			
Name of New Registered Agent: Anthony Ru	udolph Maul - Summerlin Inve	stment, LLC			
New Registered Office Address: 10950 Old	South Way				
	Enter Florida street address				
Fort Myers	, Florida	33908			
	City	Zip Code			

Pinnacle Energy Solutions, LLC

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

Page 1 of 3

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 Name **Address** Type of Action 2508 Del Prado Blvd, South Pinnacle Management Solutions LLC Cape Coral, Fl. 33904 ■ Remove 10950 Old South Way MGR Summerlin Investment, LLC ■ Add Fort Myers, Fl. 33908 ☐ Remove Anthony R. Maul 10950 Old South Way **MGR ■** Add Fort Myers, Fl. 33908 ☐ Remove □ Add ☐ Remove

Э.	f amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	•
•	Effective date, if other than the date of filing: (optional) The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)
	Dated April 10 , 2014
	Arthon Quelol Maul
	Signature of a member or authorized representative of a member
	Anthony Rudolph Maul
	Typed or printed name of signee

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Filing Fee: \$25.00

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