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2016 JAN -8 - AH III: UU

JAN 1 2016 J. HARRIS

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: SI VER SUN ENERGY, LLC. Name of Limited Liability Company	
The enclosed Articles of Amendment and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
BRIAN MARINEUI Name of Person	
SILVER SUN EVERGY, UC	•
LO TANGLEWOOD RO. Address	
DEDARY, FL. 32713. City/State and Zip Code Solar 6 99 @ GUAIL. COM E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Gabrielle Jeffords at Sul 723-4209. Name of Person Area Code Daytime Telephone Number	٠.٢
Enclosed is a check for the following amount:	
□ \$25.00 Filing Fee Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed) 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

Name of the Limited Liability (A Florida L	Company as it now appears on our records.) imited Liability Company)
The Articles of Organization for this Limited Liability Con Florida document number <u>L1400006808</u>	mpany were filed on Apr 28 th 12014 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limite	
Silver Sun Solar LLC	
The new name must be distinguishable and contain the words "Limited	d Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	60 TANGLEWOOD Rd. (- SAME)
(Principal office address MUST BE A STREET ADDRE	SSI DEBARY, FL. 32713
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registeregistered agent and/or the new registered office address Name of New Registered Agent:	red office address on our records, enter the name of the new ss here:
New Registered Office Address:	
	Enter Florida street address
·	, Florida
New Registered Agent's Signature, if changing Registered A	City Zip Code
I hereby accept the appointment as registered agent an provisions of all statutes relative to the proper and comaccept the obligations of my position as registered agent being filed to merely reflect a change in the registered company has been notified in writing of this change.	ad agree to act in this capacity. I further agree to comply with the applete performance of my duties, and I am familiar with and not as provided for in Chapter 605, F.S. Or, if this document is office address, I hereby confirm that the limited liability
•	- Considered welliam when a distinct of them westered when

MGR = Man AMBR = Auth	ager norized Member			
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Affective date, if other an effective date is listed, if Note: If the date inserted locument's effective date e record specifies a The 90th day after stated	the date must be specified in this block does in the Department of delayed effective the record is fill at \$1.57	ic and cannot be prior to not meet the applicab of State's records.	date of filing or more the le statutory filing requestion effective time	an 90 days after filing uirements, this date at 12:01 a.m.	g.) Pursuant to be will not be l	isted a

Page 3 of 3

Filing Fee: \$25.00