114000118657

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SECRETARY OF STATE FALLAHASSEE, FLORIDA

2015 AUG 31 AM 11: 5

K.SALY EXAMINER SEP - 3 2015

COVER LETTER

TO:

то:	Registration Se Division of Cor			
SUBJE	SOLAR SPECTRUM LLC			
SOBJE	Name of Limited Liability Company			
The enc	losed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please r	eturn all correspo	ndence concerning this matter	to the following:	
		BORIS ROSENS	STEIN	
			Name of Person	
	SOLAR SPECTRUM LLC			
			Firm/Company	
	2828 CORAL WAY, SUITE 309			
	Address MIAMI, FL 33145			
			City/State and Zip Code	
		boris@solartechunive	ersal.com to be used for future annual report notific	antion)
For furt	her information c	oncerning this matter, please ca	•	cation)
BORI	S ROSENST	EIN	516 606-1120	
	Name o	f Person		Telephone Number
Enclose	d is a check for th	ne following amount:		
\$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)
	Registr	ING ADDRESS: ation Section	STREET/COURIE Registration Section Division of Cornera	

P.O. Box 6327

Tallahassee, FL 32314

Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2015 Alice	ED
ZOIS AUG 3 1 TALLAHASSEE.	AM 11:58

SOLAR SPECTRUM 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 07/28/2014	and assigned
Florida document number <u>L14000118657</u> .		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and end with the words "Limited Liab	ility Company," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	<u></u>	
(Principal office address MUST BE A STREET ADDRESS)	40 × 8 × 10 × 10	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		

D. If amouding the projectived around and/or projectives of the		.44
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here		iter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
New Registered Office Address.	Enter Florida street address	
	. Florid	9
	City	Zip Code
New Designand Agent's Signature if changing Designand Agents		

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 the Managers or Authorized Member on our records, <u>enter the title, name, and address of each Manager or Authorized Member being added or removed from our records</u>:

MGR = N $AMBR = A$	IGR = Manager MBR = Authorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	BORIS ROSENSTEIN	5 VILLADOM COURT	□ Add
		DIX HILLS, NY 11746	■ Remove
			Add
			TALLAHASSEED TALLS8
			SE CARDO REMOVE
			☐ Remove
	 .		Add
			□ Remove
			Add
			□ Remove

amending any other information, en	ter change(s) here: (Attach additional sheets, if necessary.)
Effective date, if other than the date of the effective date must be specific, cannot be prior the date this document is filed by the Florida Dep.	or to date of receipt or filed date and cannot be more than 90 days after
Pated August 27,	/ 2015
Pated	
Signatur	e of a member or authorized representative of a member
Boris Rosenstein	
	Typed or printed name of signee

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WISHES I MII: 58

SECRETARY OF STATES

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Filing Fee: \$25.00