

L 14 000139046

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

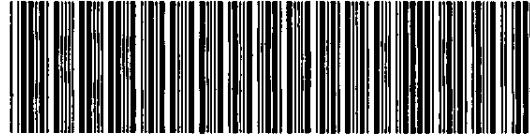
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



500266925955

12/01/14--01041--008 **30.00

FILED
14 DEC - 1 PM 4:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

12/01/14 DEC 1 0 2014

COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: River City Solar, 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:

Hunter Mann
Name of Person

River City Solar, LLC
Firm/Company

1855 Wells Rd, Suite #6
Address

Orange Park, FL 32073
City/State and Zip Code

rivercityroofingcorp@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Hunter Mann at (904) 304-0002
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the 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) |
|---|---|--|--|

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

FILED
14 DEC - 1 PM 4:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

River City Solar, 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 9/5/2014 and assigned
Florida document number L14000139046.

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 end with 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)

1855 Wells Rd, Suite #6

Orange Park, FL 32073

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

1855 Wells Rd, Suite #6

Orange Park, FL 32073

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:

Julie Baker

New Registered Office Address:

1855 Wells Rd, Suite #6

Enter Florida street address

Orange Park

City

Florida

32073

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.

Julie R Baker
If Changing Registered Agent, Signature of New Registered Agent

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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	John Michael Peckman	15 Tennessee Walker Rd	☒ Add
		Crawford, FL 32327	☐ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove

FILED
14 DEC - 4 PM 4:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

E. 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 November 25th, 2014.

Hunter Mann

Signature of a member or authorized representative of a member

Hunter Mann

Typed or printed name of signee

FILED
14 DEC - 1 PM 4:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA