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Division of Corporations
Fax Number : (850)617-6383
Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (954)208-0845
Fax Number : (614)573-3996
the email address for this business entity to be used for future
nual report mailings. Enter only one email address please.**
mail Address:
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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability (A Fiorida	Company as it now appears on our records.)	
(\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	District Energy Company)	
The Articles of Organization for this Limited Liability Co	impany were filed on January 30, 2015	and assigned
Florida document number 1.15000018565	<u>.</u>	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ed liability company here:	
Actualidad Facilities LLC		
The new name must be distinguishable and contain the words "Limit	ed Liability Company," the designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:		2
(Principal office address MUST BE A STREET ADDRI	5001	
Enverges office and cost Moor DE 71 31 REE1 71 DE RI		•
		1
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		· · · · · · · · · · · · · · · · · · ·
		• • • • • • • • • • • • • • • • • • • •
		51
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	office address on our records, <u>enter the na</u>	me of the new regis
Name of New Registered Agent:	and the same and t	·
New Registered Office Address:	***	
	Enter Florida street address	
	, Florida _	

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

To: 2 Page: 4 of 5 2023-10-02 09:41:44 CST 12122023573 From: David Thomas

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

<u>Title</u>	<u>Name</u>	Address	Type of Action
			□Add
		□Remove	
		□ Change	
		🗆 Add	
		□Remove	
			LIChange
			CJAdd
			DRemove
		****	Change
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· · · · ·	re date, if other than the date of filing:
n effe <u>ste:</u>	f the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as nt's effective date on the Department of State's records.
n effe o <u>te:</u> l cume	nt's effective date on the Department of State's records. specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
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