## U5000 109017

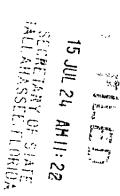
(Re	questor's Name)	
(Ad	ldress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	isiness Entity Nar	me)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
		į

Office Use Only



500275161655

07/24/15--01006--004 \*\*25.00



JUL 27 2015 J SHIVERS

## **COVER LETTER**

то:	Registration Sec Division of Corp			
SUBJE	ст: <u>(6166</u>	en Light Energy Name belimi	Systems INTERN ted Liability Company	PATIONAL, LLC
The end	closed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please	return all correspor	ndence concerning this matter t	to the following:	
		Patrici	a Cle Martino Name of Person	
		Green Light E	nergy Internation	nal, LLC
			W Corporate Blvd Address	Suite 144
		_Boxa Rato	FL 3343/ City/State and Zip Code	
		Odemarti E-mail address: (i	no 60 a omail-cox to be used for future annual report notific	vation)
For fur	ther information co	oncerning this matter, please ca	all:	
Ta	Hricia /	le Martino Person	at ( <u>56/</u> ) <u>289-</u> Area Code Daytime	Col 55 Telephone Number
Enclos	ed is a check for th	e following amount:		
<b>tty</b> \$2:	5.00 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

(Name of the Limited Lyability Company	ras it now appears on our records.)  bility Company)
(A Florida Limited Lia	ibility Company)
The Articles of Organization for this Limited Liability Company w	vere filed on 6/15/15 and assigned
Florida document number <u>L 15000 10 9013</u> .	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabili	ty company here:
Coreen Light Energy Internations The new name must be distinguishable and contain the words "Limited Liability	a) LLC  y Company "the designation "LLC" or the abbreviation "LLC"
The new name must be eximguishable and contain the words. Emined Enabling	y Company, the designation LEC of the above viation L.E.C.
Enter new principal offices address, if applicable:	<u>Same</u>
(Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
	Li con a contra de como de de marco
B. If amending the registered agent and/or registered offi registered agent and/or the new registered office address here:	ce address on our records, enter the name of the new
	same
N. CNI. D. sisters I.A. sust	<b>&gt;</b>
Name of New Registered Agent:	<u>→</u>
New Registered Office Address:	
	Enter Florida street address S = 2
	Florida 🗀 🚔 📆 🚬
-	City Zip Code
New Registered Agent's Signature, if changing Registered Agent:	22
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete p	e to act in this capacity. I further agree to comply with the performance of my duties, and I am familiar with and

4/k

company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

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

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>	Name	Address	Type of Action
			🗆 Add
			□ Remove
			Change
			Remove
			Change
			🗖 Add
			Remove
			Change
			□ Add
			Remove
			Change
			Add
			□ Remove
			Change
			Remove
			Change

f amer	ding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
_	
_	
<del></del> ,	
_	
_	
_	
_	
700 4	
f an effe	te date, if other than the date of filing: (optional)  tive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207
<u>Note:</u> I docume	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.
<b></b>	The series was the series of t
ne reco	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of
The s	90th day after the record is filed.
Dated _	
	( The Monteur
	Signature of a member or authorized representative of a member
	DI a demostica
	Tatricia attitutional Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00