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### **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: Solar Energy Connection = Name of Limited Liability Company	2
The enclosed Articles of Amendment and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Reginald Alexandre Name of Person	<del></del>
Solar Energy Connection	0N7
10969 Bal Harbor Dr	
Bora Raton FL 33  City/State and Zip Code  Regie 7 18 Dymail. Com  Demail address: (to be used for future annual report notification)	<del>1</del> 98
For further information concerning this matter, please call:	
Reginald Auxandre at (954) 226-1  Name of Person Area Code Daytime Telepho	368
Enclosed is a check for the following amount:	
\$25.00 Filing Fee \$\simega\$ \$30.00 Filing Fee & \$\simega\$ \$55.00 Filing Fee & \$\simega\$ Certificate of Status \$\simega\$ (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

Solar Energy	onrectionz	
( <u>Name of the Limited Liability Compan</u> (A Florida Limited L	ny as it now appears on our records.) iability Company)	6/24/2015
The Articles of Organization for this Limited Liability Company of Florida document number 150014745	were filed on	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	lity company here:	
The new name must be distinguishable and contain the words "Limited Liabili	ity Company," the designation "LLC" or the	he abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here		ter the name of the new
Name of New Registered Agent:		CT 20
New Registered Office Address:		mo n
	Enter Florida street address . Florida	H 9:3
·	City	Zif 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.

If Changing Registered Agent, Signature of New Registered Agent

'If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person being added</u> <u>or removed from our records</u>:

MGR = Manager

AMBR = Au	ıthorized Member		
<u>Title</u>	Name	Address	Type of Action
AMBR	Reginald Alexandre	Address 10969 Bul Hurber Dr	Boca Radd
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Cective date, if other that n effective date is listed, the date: If the date inserted in cument's effective date on	ate must be specific and this block does not me	cannot be prior to d eet the applicable	ate of filing or more e statutory filing re	(option of the contract of the	filing.) Pursu	ant to 605.020 ot be listed a
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	Signature of a m		ed representative of a			
	· Kan	inald	AUX an	<i>tre</i>		

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Filing Fee: \$25.00