L15000150876

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COVER LETTER

TO: Registration S Division of Co			
COM-ESC	CO, LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	f Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	LAWRENCE CLARK		
		Name of Person	·
	SUSTAINABLE PERFOR	MANCE SOLUTIONS LLC	
		Firm/Company	
	3212 NE 12TH ST, UNIT	301	
		Address	
	POMPANO BEACH, FL	33062	
		City/State and Zip Code	
	LARRY@SUSTAINFLOR		
		to be used for future annual report not	(fication)
For further information	concerning this matter, please c	aii:	
LAWRENCE CLARK		570 854-1199 at ()	
Name	of Person	Area Code Daytim	e 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 Addre Registration		<u>Street Address:</u> Registration Se	ction
Division of O	Corporations	Division of Cor	rporations
P.O. Box 63	27	The Centre of T	lallahassee

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

COM-ESCO, LLC (Name of the Limited Liability Company as it now appears on our records
(A Florida Limited Liability Company) 09/03/2015 The Articles of Organization for this Limited Liability Company were filed on Florida document number L15000150876 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 contain 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) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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: New Registered Office Address: Enter Florida street address , Florida __

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.

City

If Changing Registered Agent, Signature of New Registered Agent

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
AMBR	SUSTAINABLE PERFORMANCE	1805 S POWERLINE RD 107 DEERFIELD BEACH	I F □Add
			= Remove
			□Change
PROJ MC	JASON F HAUBERT	1805 S POWERLINE RD 107 DEERFIELD BEACH	II □Add
			■Remove
			□Change
			□Add
			□Remove
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fan effectiv <u>Note:</u> If th	late, if other than the date of file e date is listed, the date must be specific a e date inserted in this block does no effective date on the Department o	and cannot be prior to out to the control of the capplicable applicable appli	date of filing or more than e statutory filing requir	(optional) 90 days after filing.) Pursuant t ements, this date will not b	to 605.0207 e listed as t
	ecifies a delayed effective date, but r	not an effective time	, at 12:01 a.m. on the e	arlier of: (b) The 90th day	after the
d is filed.					
d is filed.	CEMBER 11	2024	-		
d is filed.	/	1	ed representative of a mea	nber	_

Filing Fee: \$25.00