1 LIL 0000 46752

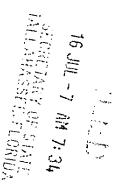
(Requestor's Name)	
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PICK-UP WAIT MAIL	
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(Document Number)	07/07/1601011
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COVER LETTER

	egistration Sec vision of Corp			
SUBJECT		ER GENERATION LLC		
SOBJECT	•	Name of Lim	ited Liability Company	
The enclose	ed Articles of A	Amendment and fee(s) are sub-	mitted for filing.	
Please retur	n all correspor	idence concerning this matter	to the following:	
		C	RISTIAN MARQUEZ	
			Name of Person	
		sur	N POWER GENERATION	
			Firm/Company	
		10460	SW 8TH STREET APT, 109	
			Address	· · · · · · · · · · · · · · · · · · ·
		PEMBRO	OKE PINES, FLORIDA 33025	
			City/State and Zip Code	
			AWER-GENERATION.COM	
		E-mail address: (1	to be used for future annual report notif	ication)
For further	information co	ncerning this matter, please ca	all:	
	CRISTIAN N	1ARQUEZ	786 812-9882	
	Name of	Person	Area Code Daytime	Telephone Number
Enclosed is	a check for the	e 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

S	UN POWER GENI	ERATION LLC		
(Name of the Lim	ited Liability Compa (A Florida Limited	ny as it now appea Liability Company)	rs on our records.)	
The Articles of Organization for this Limited I Florida document numberL16000046752	iability Company	were filed on	MARCH 07, 2016	and assigned
This amendment is submitted to amend the fol	lowing:			
A. If amending name, enter the new name o	of the limited liab	ility company h	ere:	
he new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the o	designation "LLC" or the a	bbreviation "L.L,C."
Enter new principal offices address, if applicable:		10460 SW 8TH STREET APT. 109 PEMBROKE PINES		
Principal office address MUST BE A STREET ADDRESS)		FLORIDA 33025		
Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE	BOX)	10460 SW 8TH FLORIDA 330	I STREET APT. 109 PE 25	MBROKE PINES
3. If amending the registered agent and registered agent and/or the new registered o			n our records, <u>enter</u>	the name of the
Name of New Registered Agent:				SS 7
New Registered Office Address:	10460 SW 8TH	STREET APT. 1	·	
	PEN	Enter Flo MBROKE PINES	rida street address . Florida	33025 +
		City	, 1 101 144	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.

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
MGR	Bladimir Delagneau Espino	10460 sw 8th street apt. 109 Pembr	Add
		·	☐ Remove
			Change
MGR	Olga Alonzo Bardalez	10457 Larwin Ave. Unit 1 Chatswo	■ Add
			Remove
	· ————————————————————————————————————		Change
			□ Add
		-	□ Remove
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e record The 90t	specifies a delayed effective date, but he day after the record is filed.	not an effective time, at 12	:01 a.m. on the earlier o
ated	JUNE 30 , 2016	- M	
-		ithorized epresentative of a member	·····
	Signature of a member of at	amorizogrepresentative of a member	

Page 3 of 3

Filing Fee: \$25.00