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## **COVER LETTER**

Tallahassee, FL 32314

UNSTOPI	PABLE GENERATION LLC		
, : <u></u>	Name of Lan	oted Liability Company	······································
osed Articles o	(Amendment and fee(s) are sub	omitted for filing.	
turn all corresp	ondence concerning this matter	to the following:	
	SANDRA GONZALEZ		
		Name of Person	<del></del>
	SG ELITE TAX CORP		
		Firm Company	
	119 HAMILTON TERRA	CF.	
		Address	<del> </del>
	WELLINGTON, FL 3341	4	
	CANISD AZ ACCULLUTURA N	City/State and Zip Code	
	•		tication)
er information	concerning this matter, please c	all:	
A GONZALEZ	:	561 543-5495	
Name	of Person	Area Code Daytim	te Telephone Number
Lis a check for (	the following amount:		
00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	LJ 855.00 Filing Fee & Certified Copy (additional copy is enclosed)	L! \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
		<u>Street Address:</u> Registration Se	ction
Division of Corporations		Division of Corporations The Centre of Tallahassee	
	UNSTOPICE:  UNSTOPICE:  Osed Articles of turn all corresponding and the corresponding for the corresponding fo	SANDRA GONZALEZ  SG ELITE TAX CORP  119 HAMILTON TERRA  WELLINGTON, FL 3341-  SANDRA(@SGELITETAX  E-mail address.)  er information concerning this matter, please et A GONZALEZ  Name of Person  Lis a check for the following amount:  00 Filing Fee  \$30.00 Filing Fee & Certificate of Status  Mailing Address:  Registration Section	Division of Corporations  UNSTOPPABLE GENERATION LLC  The Name of Limited Liability Company  osed Articles of Amendment and feets) are submitted for filing.  turn all correspondence concerning this matter to the following:  SANDRA GONZALEZ  Name of Person  SG ELITE TAX CORP  Firm Company  119 HAMILTON TERRACE  Address  WELLINGTON, FL 33414  City/State and Zip Code  SANDRA(q)SGELITETAXCORP.COM  E-trail address, (to be used for future arimus) report not er information concerning this matter, please call:  A GONZALEZ  Name of Person  A GONZALEZ  Name of Person  LI \$561  Area Code  Daytin  Lis a check for the following amount:  U0 Filing Fee  LI \$30.00 Filing Fee & LI \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)  Mailing Address:  Registration Section  Division of Corporations  Nivision of Corporations

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

UNSTOPPABLE GENERATION LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on  $\frac{04.06}{2016}$ \_\_\_\_ and assigned Florida document number 1.16000067982 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 "LLC." 6489 BAY CLUB DRIVE UNIT 4 Enter new principal offices address, if applicable: FORT LAUDERDALE, FL 33308 (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

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

\_\_\_\_\_\_ Florida \_\_\_\_

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
MMBR	PAOLO MEUCCI	6489 BAY CLUB DRIVE UNIT 4	
		FORT LAUDERDALE, FL 33308	Remove
			□Change
MGRM	SERENA ACCAI	6489 BAY CLUB DRIVE UNIT 4	<b>≣</b> Add
		FORT LAUDERDALE, FL 33308	□Remove
			TChange
			□Remove
			=Change
		<del></del>	
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Effective date, if other than the tlf an effective date is listed, the date mu Note: If the date inserted in this b document's effective date on the E	st be specific and cannot be prior to da lock does not meet the applicable	(option te of filing or more than 90 days after fil statutory filing requirements, this d	ing.) Pursuant to 605,0207 (3%
the record specifies a delayed effective cord is filed.	ze date, but not an effective time, a	at 12:01 a.m. on the earlier of: (b)	The 90th day after the
Dated JUNE 13	2024		
	Serena Cle	eai	
	Signature of a member or authorized	f representative of a member	
SERENA ACCAI			
	Typed or printed na	me of signee	

Filing Fee: \$25.00