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COVER LETTER

Div	ision of Corpo	orations					
SUBJECT:	Live	Solar F	OYI	da, Limi ed Liability Company	ted	Liabilit	x Company
The enclosed	l Articles of A	mendment and fee(s)) are subm	nitted for filing.			
Please return	all correspond	lence concerning thi	s matter to	the following:			
		Kather	ine	M. P.	owel	1	
				Name of Person			_
				Firm/Company			
		4411	Bu	Ridge	Rd	•	
		kmp43	88 (o	City/State and Zip Co gmail, Cu be ased for future and	ode	notification)	_
For further in	nformation cor	cerning this matter,			Total Topoli		
 -	Name of F	Person Person		at () Area Code	Day	ytime Telephone Nu	mber
Enclosed is a	a check for the	following amount:					
□ \$25.00 F	iling Fee	\$30.00 Filing Fe Certificate of S	e & Status	S55.00 Filing F Certified Copy (additional copy is	у	Certi Certi	O Filing Fee, ificate of Status & ified Copy ional copy is enclosed)

MAILING ADDRESS:

TO:

Registration Section

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

Live Solar Florida,			Company	
(Name of the Limited Liability Com (A Florida Limited	<u>pany as it now appe</u> d Liability Company	ars on our records.)	•	
The Articles of Organization for this Limited Liability Compare	ny were filed on _	05/23/2016	and assigned	
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited lia	bility company	here:		
Sustainable Generation Co	nsultanc	Y, LLC		
The new name must be distinguishable and contain the words "Limited Lial	bility 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: (<u>Mailing address MAY BE A POST OFFICE BOX)</u>	4411 3423	Bee Ridge 3 # 491	Rd. Saras	<i>p</i> 19
B. If amending the registered agent and/or registered registered agent and/or the new registered office address he		on our records, <u>ente</u>	r the name of the new	<u>v</u>
Name of New Registered Agent:		,		
New Registered Office Address:				
	Enter F	lorida street address		
	City	, Florida _	Zip Code	
New Registered Agent's Signature, if changing Registered Agen	<u>t:</u>			
I hereby accept the appointment as registered agent and ag provisions of all statutes relative to the proper and complet accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered offic company has been notified in writing of this change.	te performance of s provided for in ce address, I her	of my duties, and I am Chapter 605, F.S. O eby confirm that they	familiar with and r, if this document is imited liability	
If Ch	anging Registered.	Agent, Signature of New I	legistbred Agent	

Page 1 of 3

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			
 						
			□ Remove			
			Add			
			□ Remove			
			□ Change			
<u></u>						
			□ Remove			
			Change			
	·····					
			Remove			
		-	☐ Change			
			□ Add			
			☐ Remove			
			OF S THE Remove			

D. If amending any other informat	ion, enter change(s) here: (Attac ective Date as		· ·	
605.0207 is	c. 06/01/2016	provided write	<u> </u>	-
		es of Organ	ization -	-
To Amend	Restated Article	III to r	ead,	-
" An online	real estate ma	rketplace an	d	_
general mano	gement consulti	ng services	For	_
renewable	gement consulti energy."			-
				-
		•		-
			.	-
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			**************************************	-
E. Effective date, if other than the (If an effective date is listed, the date must Note: If the date inserted in this blo document's effective date on the De If the record specifies a delayed (b) The 90th day after the record	be specific and cannot be prior to date of ck does not meet the applicable statu partment of State's records. effective date, but not an eff	filing or more than 90 days after story filing requirements, thi	s date will not be list	ed as the
Dated 03/12/2017	1:07 PM			
The state of the s	2//		28	
Katherin	e Morgan P	resentative of a member	HASSEF	
	Typed or printed name of	fsignee	A STA	O
	Page 3 of 3		25 ATE RBA	•

Filing Fee: \$25.00