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SECRETARY OF STATE FALLAHASSEE, FLORIDA

S. WARREN JUN 0 1 2017

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Energy Storage Systems of Florida LLC Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Gregory A. Haynes Name of Person
Energy Storage Systems of Floride UC Firm/Company
4133 Coquina Dr. Address
JACLIS UNVILLE FL 32250 City/State and Zip Code
Shaynes e evergy store fl. Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Gregory A. Hayres at (964) 595-7212 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee Certificate of Status Status Statu

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

	Energy Storage Systems of Florida 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 on2/8/17 and assigned Florida document number 17000030866
-	This amendment is submitted to amend the following:
1	A) If amending name, enter the new name of the limited liability company here:
7	If amending name, enter the new name of the limited liability company here: Southeast Energy Storage Systems LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
1	Enter new principal offices address, if applicable:
1	Principal office address MUST BE A STREET ADDRESS)
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I	
	Enter new mailing address, if applicable:
1	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
70	City Zip Code New Registered Agent's Signature, if changing Registered Agent:
p a b	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 is this accument is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited limiting company has been notified in writing of this change.

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> Name Address **Type of Action** □ Remove ☐ Change □ Add □ Remove ☐ Change _□ Add ☐ Remove ☐ Change □ Add ☐ Remove ☐ Change □ Add

☐ Change

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Filing Fee: \$25.00