

L17000039988

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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WAIT

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MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

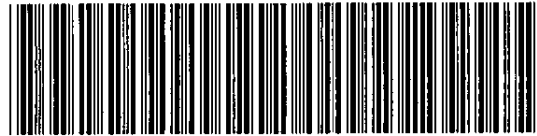
Special Instructions to Filing Officer:

Wrong form

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TALLAHASSEE, FLORIDA

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

S. WARREN

JUN 09 2017



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 25, 2017

TIMOTHY A GEPHART JR
2599 DOLLY BAY DRIVE 209
PALM HARBOR, FL 34684

SUBJECT: SOUTHFACE SOLAR, LLC
Ref. Number: L17000039988

We have received your document for SOUTHFACE SOLAR, LLC and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION - INC, but your entity is a LIMITED LIABILITY COMPANY - LLC. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Stacey M Warren
Regulatory Specialist II

Letter Number: 117A00010643

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: South Face Solar, 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:

Timothy Gephart
Name of Person
South FACE Solar, LLC
Firm/Company
2599 Dolly Bay Dr. #209
Address
PALM HARBOR/FL/34684
City/State and Zip Code
tagephart@gmail.com
Email address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Timothy Gephart at (818) 456-6603
Name of Person Area Code Daytime 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)

\$52.50 has been paid. The refund amount of \$22.50 can be mailed to the address on this cover letter. Thanks!

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**

South Face Solar, 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 02/20/2017 and assigned Florida document number L17000039988.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

N/A

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:

N/A

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

N/A

(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:

N/A

New Registered Office Address:

N/A

Enter Florida street address

_____, Florida

City

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>	<u>Address</u>	<u>Type of Action</u>
AMBR	Daniel Jaymz Johnson	3833 S. LAKE DR. Apt. 210	<input checked="" type="checkbox"/> Add
		Tampa, FL 33614	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Christopher Wayne Lee	10812 47th Ave. N	<input checked="" type="checkbox"/> Add
		St. Petersburg, FL 33708	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Nickolas Filip Scarpellino	5607 Ivy Lane	<input checked="" type="checkbox"/> Add
		Holiday, FL 34690	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

South FACE Solar, LLC is adding three
Authorized Members. The Members
include: Daniel Jaymz Johnson
Christopher Wayne Lee
Nickolas Filip Scarpellino

E. Effective date, if other than the date of filing: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:
(b) The 90th day after the record is filed.

Dated 6/4/17, _____



Signature of a member or authorized representative of a member

Timothy A. Gephart

Typed or printed name of signee

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TALLAHASSEE, FLORIDA