1/7000065700

(Re	equestor's Name)	<u> </u>
·	·	
(Ac	ddress)	
(Ac	idress)	
(Ci	ty/State/Zip/Phone	#)
PICK-UP	WAIT	MAIL
(Bi	siness Entity Name	e)
·	·	
(Do	ocument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



100320643531

ii/i3/i8--01622--033 **30.80

NOV 3 3 2013 D CUSHING

COVER LETTER

TO:		stration S sion of Co	Section orporations		
erin re	cur.	SUNSHIN	NE ENERGY SOLUTIONS LE	С	
SUBJE	CI;		Name of Li	nited Liability Company	· · · · · · · · · · · · · · · · · · ·
The encl	losed	Articles o	f Amendment and fee(s) are su	bmitted for filing.	
Please re	etum:	all corresp	oondence concerning this matte	r to the following:	
			NICHOLAS R FANELL	A	
				Name of Person	
			NR FANELŁA & CO IN		
				Firm/Company	
			434 TANGLEWOOD DE	RIVE	
				Address	
			FORT WALTON BEAC	H FL 32547	
			NFANELLA@COX	City/State and Zip Code	
			E-mail address:	(to be used for future annual report not	fication)
For furth	her int	formation	concerning this matter, please	call:	
NICHO	LAS	FANELL	A	850 862-7131	
Enclosed	d is a		of Person the following amount:		ne Telephone Number
_		ling Fee	\$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 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

SUNSHINE ENERGY SOLUTIONS LLC		
(<u>Name of the Limited Liability Compa</u> (A Florida Limited	any as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number L17000065700	were filed on <u>03/22/2017</u>	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	sility company here:	
EMERALD COAST CONTRACTING SERVICES LLC		
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the ab	obreviation "L.L.C."
Enter new principal offices address, if applicable:	29 EGLIN PARKWAY SE	
(Principal office address MUST BE A STREET ADDRESS)	FT WALTON BEACH FL 32548	
		:
Enter new mailing address, if applicable:	29 EGLIN PARKWAY SE	3
(Mailing address MAY BE A POST OFFICE BOX)	FT WALTON BEACH FL 32548	يَّهُ مَنَّ
		<u> </u>
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		the name of the no
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Florida	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
AMBR	JOHN R. BRUSH	29 EGLIN PARKWAY SE FORT WALTON BEACH FL	□ Add
			□ Change
			☐ Remove
			Change
			D Add
			Remove
			Change
			D Add
			Remove
			☐ Change
			Add
			□ Remove
		- ·	Change
			🗆 Add
			☐ Remove
			Change

_	
-	
-	
_	
_	
-	
_	
_	
_	
-	
_	
_	
_	
_	
If an off Note:	tive 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 605.02 the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed at seffective date on the Department of State's records.
he rec The	rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of the record is filed.
المسط	OVEMBER 8. 2918
Dated .	
	<i>▶ 14 (</i> 11 - Æ

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00