## U170000 86233

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(City	/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
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(5.15)	<b>,</b>	,
(Dos	cument Number)	
(LOC	ument Number)	
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Certified Copies	Certificates	s of Status
Special Instructions to F		

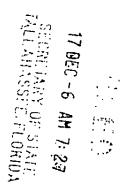
Office Use Only



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# FILING CANCELLED RETURNED CHECK

12/05/17--01033--004 \*+25.00



### **COVER LETTER**

TO: Registration Section **Division of Corporations** 

## FILING CANCELLED RETURNED CHECK

SUBJECT:	50lar	X	Construction	CLC
			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:

RAUL MALBROWN
Name of Person
Solar & Construction, (cc.
Firn/Company
2705 SE 4M St
Address
Pomparo Beach, FC 33062.
City/State and Zip Code
raymaxbrown O, solarx construction. Com.
E-mail address: (to be used for future annual report notification)
cerning this matter, please call:
400.4

For further information con-

at (754) 397-664 | 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)

### 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 Tailahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

¥ ; , , O	,LLC.	
( <u>Name of the Limited Liability Compan</u> (A Florida Limited Li	y as it now appears on our records ability Company)	.)
The Articles of Organization for this Limited Liability Company v	vere filed on O4/18/5	2017 and assigned
This amendment is submitted to amend the following:	FILI	NG CANCELLEI
A. If amending name, enter the new name of the limited liabil	ity company here: RET	URNED CHECK
The new name must be distinguishable and contain the words "Limited Liabilit	y 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>		
B. If amending the registered agent and/or registered offi registered agent and/or the new registered office address here:		enter the name of the new
Name of New Registered Agent:		17 b
New Registered Office Address:	Enter Florida street address	HASS
	, Floo	rida Triba
New Registered Agent's Signature, if changing Registered Agent:	City	
I hereby accept the appointment as registered agent and agree	e to act in this capacity. I furt	her agree to comply with the

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 = N $AMBR = A$	lanager Authorized Member		
<u>Title</u>	Name	Address	Type of Action
Mar	DAVID MORGAN	2705 SE 4MS+	D Add
	G CANCELLED RNED CHECK	2705 SE 4MSt. Paupano Beach, FL 33062	Remove Change
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			Remove
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<i>2</i>	Dr. 7
Effective date, if other than the date of filing: 0421 2017	(optional)
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than the Note: If the date inserted in this block does not meet the applicable statutory filing require	90 days after filing.) Pursuant to 605.0207 (3 ements, this date will not be listed as the
document's effective date on the Department of State's records.	
the record specifies a delayed effective date, but not an effective time, a	t 12:01 a.m. on the earlier of:
) The 90th day after the record is filed.	
2017	
Dated $OCT/21$ , $2017$ .	
Kmy R	
Signature of a member or authorized representative of a men	mber
RAUL MAXBEOCOW	
Typed or printed name of signee	

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

Page 3 of 3

Filing Fee: \$25.00