# 117000125959

Office Use Only



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## **COVER LETTER**

TO: Registration Section Division of Corpor			
SUBJECT: Th.	e Power Wo Name of Limit	ashing (Fuy) ted Liability Company	LLC.
The enclosed Articles of Am	endment and fee(s) are subn	nitted for filing.	
Please return all corresponde	ence concerning this matter to	o the following:	
	Edgar T	Rame of Person	<u></u>
	The Power	Firm/Company G-v	y, LLC
		194 Day Dr.	
	Middlebo	Chy/State and Zip Code	368
-	rneherhar E-mail address: (to	o be used for future annual report notific	cation)
For further information conce	eming this matter, please cal	II:	
Rone Vela	USquez Herran	Area Code Daytime	CC 4   Telephone Number
Enclosed is a check for the fo	ollowing amount:		
与\$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)
For further information concerns to the formation concerns to the form	Middlelo  Yeneher hav E-mail address: (to erming this matter, please cal  GSquez Herror  ollowing amount:	Chy/State and Zip Code  Chy/State and Zip Code  De used for future annual report notificall:  Code  Code  Daytime  Criffied Copy	Coth Telephone Number  \$60.00 Filing Fee, Certificate of Status & Certified Copy

## 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

Name of the Limited Liability (A Florida	V Company a	, , , , ,	ars on our re	cords.)	<u>C</u>		
The Articles of Organization for this Limited Liability Co.  Florida document number 1,1700012,59.59	ompany we				<i>-</i>	and as	signed
This amendment is submitted to amend the following:							
A. If amending name, enter the new name of the limit  The new name must be distinguishable and contain the words "Limit				LLC" or t	ie abbrevi	ation "I	"L.C."
Enter new principal offices address, if applicable:	-		<del></del>			<del></del> -,	
(Principal office address MUST BE A STREET ADDR	ESS)		··· •• • • • • • • • • • • • • • • • •	<u>-</u>	တ	201	
Enter new mailing address, if applicable:	_				ALL AHAS	19 JUL 15	
(Mailing address MAY BE A POST OFFICE BOX)	_				(/) ( // ( //	P	
B. If amending the registered agent and/or regist		e address o	on our rec	ords, <u>en</u>	ter the	iname	of the new
registered agent and/or the new registered office addr	ress here:						
Name of New Registered Agent:	<del></del>		-	<del></del>	··, , <u>,</u>		
New Registered Office Address:		Enter Fl	orida street ad	ddress			
	, Florida						
		City			2	ip Code	
New Registered Agent's Signature if changing Registered	l Agent:						

### 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 Address Type of Action Title Name □ Add \_\_\_\_ Change □ Add \_□ Change \_□ Add □ Remove ☐ Change \_□ Add \_□ Remove \_\_\_\_ Change \_□ Remove \_□ Change \_\_\_\_\_ □ Remove \_□ Change

D. If amend	ling any other information, enter change(s) here: (Anach additional sheets, if necessary.)
_	
-	
-	
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(If an effection Note: If	date, if other than the date of filing:  (optional)  ive 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)  the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the the control of State's records.
	d specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: Oth day after the record is filed.
Dated	Signature of a member or authorized representative of a member
	FORT R Valascilles Typed or printed name of signee

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Filing Fee: \$25.00