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## **COVER LETTER**

| TO: Registration Section Division of Corp. |   |   |   |
|--|---|---|---|
| subject: <u>Ma</u>                         | rketingin L                                     | LC ited Liability Company   |   |
| The enclosed Articles of A                 | mendment and fee(s) are sub-                    | mitted for filing.  |   |
| Please return all correspond               | dence concerning this matter                    | to the following:   |   |
|  | Juan D.   | Cepeda  |   |
|  | Solar Miss                                      |   |   |
|  | 6900 Tavis                                      | tock Lakes Blud Su  | ite 400   |
|  | Orlando,  | FL 32827 City/State and Zip Code                                    |   |
|  |   | ialegnail-com to be used for future annual report notificat         | ion)  |
| For further information cor                | neerning this matter, please co                 | ill:  |   |
| JUON D. (                                  |   | at ()(786) 97<br>Area Code  | 3-2117<br>Jephone Number  |
| Enclosed is a check for the                | following amount:                               |   |   |
| □ \$25.00 Filing Fee                       | ☐ \$30.00 Filing Fee &<br>Certificate of Status | ☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) | S60.00 Filing Fee. Certificate of Status & Certified Copy tadditional copy is enclosed) |
|  |   |   |   |

Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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| Marketingiv   | d Liability Compa | iny as it now appears on o<br>Liability Company) | ur records.)                               |
|---|-------------------|--|--|
| The Articles of Organization for this Limited Lia Florida document number <u>L 18000227</u> I                         | ability Company   |  |  |
| This amendment is submitted to amend the follo  | wing:             |  |  |
| A. If amending name, enter the new name of Solar Mission LLC  The new name must be distinguishable and contain the we |                   |  | tion "L.L.C." or the abbreviation "L.L.C." |
| Enter new principal offices address, if applica (Principal office address MUST BE A STREE)                            |                   |  | ock Lakes Blud suite 400<br>32827          |
| Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE I                                     | BOV)              | 6900 Tavistock                                   | Lakes Blud Suite 400                       |
| B. If amending the registered agent and/or reagent and/or the new registered office address                           | gistered office : |  |  |
| Name of New Registered Agent: New Registered Office Address:  | 6900 Fa           | vistock lakes<br>Enter Florida str               | Blvd. Suite 400                            |
|   | Orlan             | ndo<br>City                                      | , Florida <u>32827</u><br>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 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 |
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| Note:                 | ive date, if other than the date of filing:  | 07 (3<br>as th |
| ne recor<br>ord is fi | d 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<br>led. | e              |
| Dated                 | April 17 . 2020.   |                |
|                       | April 17  2020  Signature of a member or authorized representative of a member   |                |
|                       | Juan D. Cepeda Typed or printed name of signee   |                |
|                       | · WWW I) lippeda   |                |

Filing Fee: \$25.00