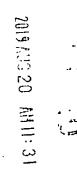
# 19000042916

Office Use Only



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## **COVER LETTER**

	Registration : Division of C		ė	
SUBJEC		ECH ELC		
SUBJEC	. I :	Name of Lim	ited Liability Company	
The encl	osed Articles c	of Amendment and fee(s) are sub	unitted for filing.	
Please re	turn all corres	oondence concerning this matter	to the following:	
		Laura Atkinson		
		Boyer Ginori CPAs LLC	Name of Person	<del></del>
		1645 Palm Beach Lakes B	Firm/Company lvd. Ste. 480	
		West Palm Beach, FL 334	Address	
		eginori@boyerginoricpas.co	City/State and Zip Code	
lian filmbi	ar information	E-mail address: ( concerning this matter, please ca	to be used for future annual report not	fication)
Laura At		concerning this matter, please of	561 323-6520	
	Name	of Person	at () Area Code Daytim	ne Telephone Number
Enclosed	is a check for	the following amount:		
<b>■ \$</b> 25.0	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 Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO TO ARTICLES OF ORGANIZATION OF ANNALIS 20

2019 AUG 20 AH 11:31

### SEILD TECH 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 Liabi	lity Company were filed on 02/19/2019	and assigned			
Florida document number L19000042916					
This amendment is submitted to amend the following	ng;				
A. If amending name, enter the new name of the	e limited liability company here:				
Solar Environmental Tech LLC					
The new name must be distinguishable and contain the words	s "Limited Liability Company," the designation "LI	.C" or the abbreviation "L.L.C."			
Enter new principal offices address, if applicable	e:				
(Principal office address MUST BE A STREET A	(DDRESS)				
(Mailing address MAY BE A POST OFFICE BO)  B. If amending the registered agent and/or registered agent and/or the new registered office	registered office address on our recor	ds, enter the name of the nev			
Name of New Registered Agent:		• •			
New Registered Office Address:	Enter Florida street addr	asc.			
Enter Frontag street dadress					
_	, I	Florida Zip Code			
	******	Tally Salvan			

## 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, <u>enter the title, name, and address of each person</u> <u>being added or removed from our records</u>:

MGR = Manager

$\mathbf{AMBR} = A$	Authorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
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			□ Remove
			Change
			Remove
			Change
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			□ Remove
			□ Change
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effective date is listed, the	date must be specific and cannot	ot be prior to date of fi	ling or more than 90 d	_ (optional) ays after filing.) Pursuan	it to 605.020
	i this block does not meet to in the Department of State's		ory filing requireme	ints, this date will not	be listed as
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record specifies a d	elayed effective date,	but not an effe	ctive time, at 1	2:01 a.m. on the	earlier o
he 90th day after ti	ne record is filed.		^		
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Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00