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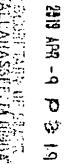
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COVER LETTER

Division of Corpora	tions		
SUBJECT: ESC	AMBIA EN	JECCY (CC_ ed Liability Company	<u>, </u>
	Name of Emilia	a manny company	
The enclosed Articles of Ame	ndment and fee(s) are subm	itted for filing.	
Please return all corresponder	ce concerning this matter to	the following:	
	5		
-	JOSEPH	REAKE MIE Name of Person	YER
-	ESE AMB,	Firm/Company	11C
-	13 5 PA	Address	
-	PENSAC	O. L. A. F. A. 3 City/State and Zip Code	2.550.2-
_	-JCEBERKE M E-mail address: (to	be used for future annual report not	(. ('G144
For further information conce	rning this matter, please cal	l:	
TOSEPH REI Name of Per	CKEMEVER son	at (<u>312)</u> <u>783</u> Area Code Daytim	-/838 ne Telephone Number
Enclosed is a check for the fo	lowing 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

TO:

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**

ESCAMBIA	ENERG	Y, 1.1 C
(<u>Name of the Limited Liability Comp</u> (A Florida Limited	any as it now appear. Liability Company)	s on our registis. APR - 9 P 3 20
The Articles of Organization for this Limited Liability Company	y were filed on	3/3//ARASCE and assigned
Florida document number <u>L 190000 79.518</u> .		ŧ
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lial	bility company he	<u>re</u> :
The new name must be distinguishable and contain the words "Limited Liab	ility Company," the de	esignation "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:		
(Mailing address MAY BE A POST OFFICE BOX)		
		·
B. If amending the registered agent and/or registered or registered agent and/or the new registered office address here.		our records, enter the name of the new
Name of New Registered Agent:	 .	
New Registered Office Address:		
	Enter Flori	ida street address
	· · · · · · · · · · · · · · · · · · ·	, Florida Zip Code
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent	<u>:</u>	

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>	Name	Address	Type of Action
MGR	JUSEPH BERKEMENER	163 Sour H HAWTHORNICE AL	<u>/</u> €,□ Add
		ELMILUKSI, IL GOIZLE	
			Change
MER	DAVID ROPALI	4077 SOUND POINTE DRIVE	D Add
		COULF BREEZE, FL 3256	3 12 Remove
			Change
<u>MI-12</u>	L'ATICNAL ENERGY USA, L	11c 13 SOUTH PALAFIX ST	Add
		PENSACOLA FL 37.502	□ Remove
			Change
			🗆 Add
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an effe lote:	we date, if other than the date of filing:
	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of 90th day after the record is filed.
ated _	Signature of a member or authorized representative of a member
	Margel I Beckernen
	Signature of a member or authorized representative of a member
	TOSEPH BERKESPALLER Typed or printed name of signee
	~ CXPH ISERKEMIEKEK

Page 3 of 3

Filing Fee: \$25.00