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THER ONE SOLAR PANEL INSTALLATION AND DESIGN-ENGINEERING FIRM, LLC SUBJECT: \_ 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: Harold Harper Name of Person TIER ONE SOLAR PANEL INSTALLATION AND DESIGN ENGINEERING Firm/Company 8817 Metheny Circle Address Tampa, FL 33615 City/State and Zip Code harold@t1solarfirm.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Harold Harper 813 \_ at (\_\_\_\_\_ Daytime Telephone Number Name of Person Enclosed is a check for the following amount: \$25.00 Filing Fee □ \$30.00 Filing Fee & ☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee, Certificate of Status Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed) (additional copy is enclosed) Mailing Address: Street Address: Registration Section Registration Section Division of Corporations Division of Corporations P.O. Box 6327 The Centre of Tallahassec Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

TO:

Registration Section Division of Corporations

### TO ARTICLES OF ORGANIZATION OF

#### TIER ONE SOLAR PANEL INSTALLATION AND DESIGN ENGINEERING FIRM, 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 Liability Company were filed on  $\frac{05/17/2019}{1}$ and assigned Florida document number  $\frac{L19000134358}{}$ This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 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 office address on our records, enter the name of the new regi agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

#### 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 we provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with an accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document 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

## or removed from our records:

MGR = Manager

MICIK -	Manager	
AMBR =	Authorized	Member

<u>Title</u>	<u>Name</u>	Address	Type of Acti
MGR	MARK THOMAS	1416 LEIGHTON AVENUE, LAKELAND, F	FL 33803 <b>≡</b> Add
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## Page 2 of 3

D. 11 amen	ding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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<u>Note:</u> II	e date, if other than the date of filing:
	rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of 0th day after the record is filed.
Dated	4-77 <u>2020</u>
	Signature of a member or authorized representative of a member
	Harold Harrer
	Typed or printed name of signee