Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

ä

Account Name : CONTRACTORS REPORTING SERVICES, INC.

Account Number : I20050000099

Phone

: (813)932-5244

Fax Number

: (813)932-3782

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address:

bill@activatemylicense.com

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN DYNASTY POWER LLC

Certificate of Status	0
Certified Copy	0
Page Count	06
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Corporate Filing Menu

Help

From: BIII Moore

Fax: 18139325244

To: LLC Amendment

Fax: (850) 517-6383

Page: 2 of 6

07/14/2020 11:33 AM

#### COVER LETTER

(((H20000223634 3))) TO: Registration Section Division of Corporations SUBJECT: DYNASTY POWER LLC 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: BILL MOORE Name of Person CONTRACTORS REPORTING SERVICE INC Firm/Company 13795 N NEBRASKA AVE Address TAMPA, FL 33613 City/State and Zip Code info@activatemylicense.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: **BILL MOORE** 932-5244 Name of Person Daytime Telephone Number Enclosed is a check for the following amount: ☐ \$60.00 Filing Fee, S25.00 Filing Fee S30.00 Filing Fee & □ \$55.00 Filing Fee & Certificate of Status & Certificate of Status Certified Copy Certified Copy (additional 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

(additional copy is enclosed)

From: Bill Moore Fax: 18139325244 To: LLC Amendment Fax: (850) 617-6383 Page: 3 of 6 07/14/2020 11:33 AM

(((H20000223634 3)))

### Dynasty Power LLC

26221 Pheasant Run Wesley Chapel,FI 33544 CGC 1526411

Email: bdcbarnhardt@gmail.com

# Name Change

### July 14, 2020

To Whom it May Concern:

I, Chris Barnhardt, the sole owner of Dynasty Power LLC, am requesting a name change of my company to Affordable Solar Solutions LLC, a company that I also held ownership in. I have voluntarily dissolved Affordable Solar Solutions LLC (filed 01/16/2020) on 03/18/2020 in hopes to amend Dynasty Power LLC to Affordable Solar Solutions LLC, which is what my intensions were in the first place.

agest

Thank You

Chris Barnhardt

From: Bill Moore

Fax: 18139325244

To: LLC Amendment

Fax: (850) 617-6383

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### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

**OF** 

DYNASTY POWER LLC (Name of the Limited L	iability Company as it now appears on our records.) Torida Limited Liability Company)	
(A F	Torida Limited Liability Company)	
The Articles of Organization for this Limited Liabil Florida document number <u>L19000178355</u>	lity Company were filed on 07/10/2019	and assigned
This amendment is submitted to amend the following	ng:	
A. If amending name, <u>enter the new name of the</u>	e limited liability company here:	
AFFORDABLE SOLAR SOLUTIONS LLC		
The new name must be distinguishable and contain the words	"Limited Liability Company," the designation "LLC" or	the abbrevieron "L.L.C."
Enter new principal offices address, if applicable	p:	<u> </u>
(Principal office address MUST BE A STREET A	DDRESS)	
		58 -
		SEE SEE D
Enter new mailing address, if applicable:		F 5
(Mailing address MAY BE A POST OFFICE BO)	<u> </u>	ं तेने 👤
·		
B. If amending the registered agent and/or regis agent and/or the new registered office address ho		name of the new registe
Name of New Registered Agent:		- <del></del>
New Registered Office Address:		
	Enter Florida street address	
	, Florid	
	City	Zip Code

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

 4111	Moore	

MGR = Manager

Fax: 18139325244

To: LLC Amendment

Fax: (850) 617-6383

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□ 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		(((H20000223634 3)))		
<u>Title</u>	<u>Name</u>	Address	Type of Action	
			□Add	
			□Remove	
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Fax: 18139325244

To: LLC Amendment Fax: (850) 617-6383

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Note: If the date inserted in thi	the date of filing:  must be specific and cannot be prior to do s block does not meet the applicable e Department of State's records.	ate of filing or more than 90 days after	ional) er filing.) Pursuant to as date will not be	605.0207 listed as
e record specifies a delayed effe rd is filed.	ctive date, but not an effective time,	at 12:01 a.m. on the earlier of: (	b) The 90th day (	after the
Dated	2020			
	Signature of a member of authorize	d representative of a member		_
		- · · · · · · · · · · · · · · · · · · ·		
	ARNHARDT			

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Filing Fee: \$25.00