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(Re	questor's Name)	
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COVER LETTER

	Cegistration Division of C	Section Corporations		
SHRIFCT	RENEW	ABLE SOLAR ENERGY LLC		
SUBJEC	·	Name of Lir	nited Liability Company	
The enclos	sed Articles	of Amendment and fee(s) are sul	bmitted for filing.	
Please retu	ırn all corres	spondence concerning this matter	to the following:	
		CISELA RIVERA		
			Name of Person	
		G&A LOYAL TAX SER	VICES INC	
Name of Person G&A LOYAL TAX SERVICES INC Firm/Company 16W DAKIN AVE STE B Address KISSIMMEE FLORIDA 34741 City/State and Zip Code 84ANDRESGOMEZ@GMAIL.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: GISELA RIVERA 407 4491815				
		16W DAKIN AVE STE E	3	
			Address	
		KISSIMMEE FLORIDA	34741	
			City/State and Zip Code	
			•	fication)
For further	information	concerning this matter, please c	all:	
GISELA F	RIVERA			
	Name	of Person		e Telephone Number
Enclosed is	s a check for	the following 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)
R D P.	O. Box 63	Section Corporations	Street Address: Registration Sec Division of Cor The Centre of T 2415 N. Monroo Tallahassee, FL	porations fallahassee e Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

t now appears on our records.) y Company)
filed on JULY 16, 2019 and assigned
ompany here:
npany," the designation "LLC" or the abbreviation "L.L.C."
ss on our records, enter the name of the new regist
<u> </u>
· l
Enter Florida street address
, Florida
ty 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
			□Add
			□Remove
			□Change
			□Add
			□Remove
			Change
			
			□Remove
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(If an eff <u>Note:</u>	FEBRUARY 27 2021 (optional) fective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0 If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed tent's effective date on the Department of State's records.)207 : 1 as :
ne recor ord is fil	rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after led.	the
Dated	FEBRUARY 27 2021	
	Signature of a member or authorized representative of a member	

Filing Fee: \$25.00