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COVER LETTER

Division of Corporations
SUBJECT: Earth Right Energy East 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:
Name of Person
Earth Right Energy Fast LLC Firm/Company
5375 Ortege, Farms BLUD Unitle 12
Jac Kenville, FL 30010 City/State and Zip Code
E-mail address; (to be used for future annual report notification)
For further information concerning this matter, please call:
Mellssa EalCle at (S40) 335-S134 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
□ \$25.00 Filing Fee

MAILING ADDRESS:

TO:

Registration Section

Registration Section Division of Corporations P.O. Box G327 Tallahussee, 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

tarth Right	Enera	y East U	u our records)			
(Name of the Limited I	Florida Limited Li	ability Company)	14(0105,)			
The Articles of Organization for this Limited Liability Company were filed on $\frac{7-34-19}{100000000000000000000000000000000000$						
This amendment is submitted to amend the following	ng:					
A. If amending name, <u>enter the new name of th</u>	e limited liabil	ity company her	<u>e</u> :			
The new name must be distinguishable and contain the words	s "Limited Liabili	ty Company," the des	ignation "LLC" or th	e abbreviation "	L.L.C."	
Enter new principal offices address, if applicable	e:				ن	
(Principal office address MUST BE A STREET A	(DDRESS)			<u> :: </u>	<u> </u>	
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				; · .	S	,
Enter new mailing address, if applicable:			<u></u>	<u></u>	e	
(Mailing address MAY BE A POST OFFICE BO	<u>X)</u>					<u>-</u>
·						2
B. If amending the registered agent and/or registered agent and/or the new registered office			our records, ent	er the name	of the	е печ
Name of New Registered Agent:	Dime	<u>steiol</u>	<u> </u>			
New Registered Office Address:		Enter Florida	a street address			
			, Florida			<u></u>
		City		Zip Code		
New Registered Agent's Signature, if changing Regi						
I hereby accept the appointment as registered ag provisions of all statutes relative to the proper a accept the obligations of my position as register being filed to merely reflect a change in the regi company has been notified in writing of this cha	nd complete p ed agent as pi stered office o	performance of my ravided for in Ch	y duties, and I al apter 605, F.S. C	m familiar wi Or, if this doc	in ana ument l	
		54	1180	Doubles of 5		
	If Chang	ing Registered Agen	t, <u>Signature of New</u>	Registered Age	<u>nt</u>	

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 = M AMBR = A	lanager .uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	James Reid, Ir	5375 Ortige Farms Blue	- Add
		Jacksonville, FL 3321	○ □ Remove
			Change
AMBR	Chuck Fuller	BY65 2 MSt E B102	⊟ Add
		Treasure Island FL	□ Remove
		3370	₽ □ Change
	Melissa Fakle	304 w Fairchild Or	Add
		Strasburg VA 2365	Remove
			Change
			Remove
			Change
			□ Remove
			Change
			□ Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
Effective date, if other than the date of filing:	207 (3) l as the
document's effective date on the Department of State's records.	
the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier) The 90th day after the record is filed.	of:
Dated August 30 . 2019.	
Signature of a member or authorized representative of a member	
james reid	
Typed or printed name of signee	

Page 3 of 3

Filing Fee: \$25.00