## L19000211948

(Req	uestor's Name)	
	ress)	
	1633)	
(Add	ress)	
(City/	State/Zip/Phone	e #)
PICK-UP		MAIL
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(Doc	ument Number)	
Certified Copies	Certificates	of Status
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Special Instructions to Fi	ilina Officer	
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TO:	<ul> <li>Registration Section</li> <li>Division of Corporat</li> </ul>				
SUBJE	CT:	horld	Class	Solar	LLC
		Name of Lin	nited Liability Compan	y.	

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

QD Name of I Firm/Company Address City/State and Zip Code ).com a a 1(71 E-mail address: go be used for future annual report notification

For further information concerning this matter, please call:

Area Code Daytime Telephone Number Name of Pe

Enclosed is a check for the following amount:

☑ \$25.00 Filing Fee

□ \$30.00 Filing Fee & Certificate of Status S55.00 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 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

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ARTICLES OF A	AMENDMENT	
' TO	)	
ARTICLES OF O	RCANIZATION	
OF	1	
( <u>Name of the Limited Liability Compan</u> (A Florida Limited Li	Solar LLC y as it now appears on our records.) ability Company)	-
The Articles of Organization for this Limited Liability Company v	vere filed on <u>August 20, 2019</u> and	assigned
Florida document number <u>119000211948</u>	$\int \partial \gamma $	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabil	lity company here:	
	c. 5	70
The new name must be distinguishable and contain the words "Limited Liabilit	ty Company," the designation "LLC" or the abbreviation	P.L.C.
		SE US
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		ີພີ່
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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, <u>enter the name of the new</u> registered agent and/or the new registered office address here:

Name of New Registered Agent:	_ Aaria C:	Marshall
New Registered Office Address:	8157 Xenia	Lanc street address
	<u>Aaples</u>	Florida <u>34114</u> 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.

ars If Changing Registered Agent, Signature of New Registered Agent

i Changing Registered Agent, <u>Signature of New Registere</u>

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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

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<u>Title</u>	Name	Address	Type of Action
MGR	Spria C Marshall	8157 Xenia Lanc	Add
		8157 Xenia Lanc Maples, FL 34114	CRemove
			□ Change
AMBR	Maria C. Marshall	8157 Xenia Lanc	Add
		1 8157 Xenia Lanc Maples, 72 34114	🗆 Remove
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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E. Effective date, if other than the date of filing: <u>Huggs</u> 19, 2019 (optional) (If an effective 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 605.0207 (3)(b) <u>Note:</u> If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated	September 17th 2019
	Haria C. Warshall
	Signature of a member or authorized representative of a member
	Daria Crystal Marshall
	Typed or printed name of signee

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Filing Fee: \$25.00