L200000 50509

_____
(Requestor's Name)

_____
(Address)

_____
(Address)

_____
(City/State/Zip/Phone #)

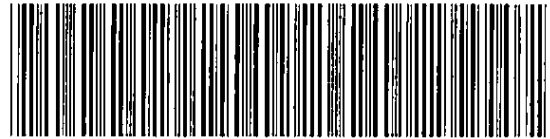☐ PICK-UP   ☐ WAIT   ☐ MAIL

_____
(Business Entity Name)

_____
(Document Number)

Certified Copies _____   Certificates of Status _____

Special Instructions to Filing Officer:

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2023 MAY 25 PM 2 20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 1, 2023

E2COMPANIES
8901 QUALITY ROAD
BONITA SPRINGS, FL 34135-7331

SUBJECT: PALM ENERGY LLC
Ref. Number: L20000050509

We received this check with no attachments. To prevent delays in filing and improper application of fees, please return the check together with the appropriate document for processing.

If you have any questions concerning this matter, please either respond in writing or call (850) 245-6050.

Darlene Connell
Regulatory Specialist II Supervisor   Letter Number: 623A00009743

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Palm Energy, LLC
_____
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Janessa Goldstein
_____
Name of Person

Palm Energy, LLC
_____
Firm/Company

8901 Quality Rd.
_____
Address

FILL# L200000
50509

Bonita Springs FL 34135
_____
City/State and Zip Code

janessa.goldstein@e2companies.com
_____
E-mail address: (to be used for future annual report notification)

For further information concerning this matter. please call:

Janessa Goldstein   at (239) 719-0008
_____   _____
Name of Person   Area Code & Daytime Telephone Number

Mailing Address: **Street Address:**
Registration Section   Registration Section
Division of Corporations   Division of Corporations
P.O. Box 6327   The Centre of Tallahassee
Tallahassee. FL 32314   2415 N. Monroe Street, Suite 810
                                          Tallahassee. FL 32303

Enclosed is a check for the following amount:

☑ $25 Filing Fee   ☐ $55 Filing Fee & Certified Copy

INHS18 (2/14)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Name of the limited liability company: __Palm Energy, LLC__

2. (a) _____   (b) _____

   Principal office address of limited liability company: Mailing address of limited liability company:
   (*Note: MUST BE STREET ADDRESS*)   (*Note: MAY BE POST OFFICE BOX*)

   8901 Quality Rd.   8901 Quality Rd.

   Bonita Springs, FL 34135   Bonita Springs, FL 34135

   2/12/2020   L20000050509

3.   Date of filing/registration in Florida   4.   Document number

5. (a) _____

   Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

   Cona Law PLLC

   Registered Office Address   (*MUST BE FLORIDA STREET ADDRESS*)

   3785 Airport Rd. Suite C

   Naples   , FL 34105

   (b) _____

   Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

   Janessa Goldstein

   NEW Registered Office Address:

   8901 Quality Rd.

   Bonita Springs   , FL 34135

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

_____   James Richmond
Signature of a member or authorized representative of a member   Printed or typed name of signee

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.

_____
Signature of Registered Agent

Division of Corporations• P.O. Box 6327• Tallahassee, FL 32314
FILING FEE: $25.00

INHS18 (2/14)