## 120000058761

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## **COVER LETTER**

	Registration Se Division of Cor		,		
418185 PET 430	Extreme S	olar LLC	. з		
Name of Limited Liability Company					
The enclo	sed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please ret	urn all correspo	ondence concerning this matter	to the following:		
		Luis Rodriguez			
			Name of Person	<del></del>	
		Extreme Solar LLC			
			Firm/Company	<del></del>	
		108 Francis RD			
Address					
		Palatka FL 32177			
			City/State and Zip Code		
		ExtremeSolarLLC@gmail		···	
		E-mail address: (	to be used for future annual report no	tification)	
For further	er information e	oncerning this matter, please of	all:		
Luis Rod	Iriguez		407 978-2668		
	Name o	f Person		nie Telephone Number	
Enclosed	is a check for th	ne following amount:			
□ \$25.0	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)	
Mailing Address: Registration Section		Street Address: Registration S	ection		
Division of Corporations		Division of Co			
P.O. Box 6327		The Centre of	The Centre of Tallahassee		
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810			

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Extreme Solar LLC	
(Name of the Limited Liability Company as it n (A Florida Limited Liability C	ow appears on our records.) Company)
The Articles of Organization for this Limited Liability Company were fill Florida document number L20000058761	led on 02/21/2020 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability con	npany here:
The new name must be distinguishable and contain the words "Limited Liability Comp	pany," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
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, enter the mame of the new regis
agent and/or the new registered office address here:	
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	, Florida
City	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 Changing Registered Agent, Signature of New Registered Agent

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
AMBR	Luis Roman	108 Francis Rd Palatka FL 32177	<b>\</b> Add
			□Remove
owner	Luis Rodriguez	108 Francis Rd Palatka FL 32177	<b>=</b> Add
			Петоvе
			□Add
			ПРетюче
			Change
		<del></del>	□Remove
			☐ Change
	<del></del>		[]Add
			□Remove
			□Change
	***************************************		□Add
			□Remove
			□ Change

D. II ame	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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Note:	ve date, if other than the date of filing:
If the record record is fil	d 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 ed.
Dated	3/5/2020
Dated	1- Maduica 2
	Signature of a member or authorized representative of a member
	Luis Rodriguez

Filing Fee: \$25.00

Typed or printed name of signee