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Charles 6705 Sur Rivervier	James nmer Co n Fl 33	578 —		
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COVER LETTER

TO: Registration Se Division of Cor							
Integrity So	lar By Design LLC	•					
SUBJECT: Name of Limited Liability Company							
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.					
	ndence concerning this matter						
	Charles James						
		Name of Person					
	-	Firm/Company					
		Address					
		City/State and Zip Code					
		to be used for future annual report notif	ication)				
For further information c	oncerning this matter, please c	all:					
Charles James		813 393-6048 at ()					
Name o	f Person	Area Code Daytime	e Telephone Number				
Enclosed is a check for the	ne 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)				
Mailing Address: Registration Section		Street Address: Registration Sec	ction				
Division of Corporations		Division of Cor					

P.O. Box 6327

Tallahassee, FL 32314

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

RECEIVED

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF.

(A	Liability Company as it now appears on our rec Florida Limited Liability Company)	
,	4/15/2020	and assigned
e Articles of Organization for this Limited Liab	ality Company were men ====	
orida document number 120000104036		-1 22
is amendment is submitted to amend the follow	ang:	ZOED JUH SECZI TALLAHA
If amending name, enter the new name of t	he limited liability company here:	
	1. 91 instead Liability Company," the designation	"LLC" or the abbreviation L.L.C."
ie new name must be distinguishable and contain the wo	ras Ellinea Diaves,	5 5
nter new principal offices address, if applica		No. 0
Principal office address MUST BE A STREET	(ADDRESS)	
		
Enter new mailing address, if applicable:	-	
Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE	<u>BOX)</u> ————————————————————————————————————	
Mailing address MAY BE A POST OFFICE		
Mailing address MAY BE A POST OFFICE		enter the name of the new registe
Mailing address MAY BE A POST OFFICE	egistered office address on our records,	enter the name of the new registe
Mailing address MAY BE A POST OFFICE	egistered office address on our records,	enter the name of the new registo
Mailing address MAY BE A POST OFFICE B. If amending the registered agent and/or agent and/or the new registered office addre	egistered office address on our records, ss here:	enter the name of the new registo
Mailing address MAY BE A POST OFFICE	egistered office address on our records, ss here: Charles James	enter the name of the new registo
Mailing address MAY BE A POST OFFICE B. If amending the registered agent and/or agent and/or the new registered office address of New Registered Agent:	registered office address on our records, ss here: Charles James 6705 Summer Cove DR	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE) B. If amending the registered agent and/or agent and/or the new registered office address. Name of New Registered Agent: New Registered Office Address:	egistered office address on our records, ss here: Charles James	

New Registered Agent's Signature, if changing Registered Agent;

Thereby 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. Thereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

** Suthorized Person(s) authorized to manage, enter the title, name, and address of each person being added om our records:

AMBR = Authorized Member

AMBR = Authorized Member					
<u>Title</u>	Name	Address	Type of Action		
			□ Add		
			□Remove		
			□ Change		
	-	-			
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