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(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(Address)  (Address)  (City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer.

Office Use Only







## Sunshine State Corporate Compliance Company

3458 Lakeshore Drive, Tallahassee, Florida 32312 (850) 656-4724

DATE 09/08/2020				<b>⇔</b> WALK	IN**
ENTITY NAME ELKINS	AND BEUS LLC				
DOCUMENT NUMBER					
	**PLEASE FILE TH	E ATTACHED AND R	ETURN**		
XXXX	Plain Copy				
·	Certified Copy				
	Certificate of Status				
	Certified Copy of Arts Certificate of Good Sta				
	**APOSTILLE' / N	OTARIAL CERTIFIC	CATION**		
COUNTRY OF DESTINAT	TON				
NUMBER OF CERTIFICAT	TES REQUESTED				
TOTAL OWED \$25.00			INT #: 12016000007	72	
Please call Tina at th	e above number for	2		ro much!	

## COVER LETTER

TO:

Registration Section

Division of Cor	porations			
Elkins and	Beus LLC			
SUBJECT:	Name of Lim	ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	Megan Fuentes			
		Name of Person		
	ZenBusiness PBC			
		Firm/Company		
	5900 Balcones Dr. Suite 50	000		
	***	Address	· <del>····································</del>	
	Austin, Texas, 78731			
		City/State and Zip Code		
	fulfillment@zenbusiness.co			
		to be used for future annual report noti	fication)	
For further information of	concerning this matter, please c	all:		
Megan Fuentes		844 493-6249 at ( )		
Name o	f Person	Area Code Daytim	e Telephone Number	
Enclosed is a check for t	he 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 9 Division of C P.O. Box 632 Tallahassee,	Section Corporations 27	Street Address: Registration Sec Division of Cor The Centre of T 2415 N. Monro Tallahassec, FL	porations Tallahassec e Street, Suite 810	

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

\_은 (\*\* 9: 43 Elkins and Beus LLC (Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on  $\frac{08/07/2020}{}$ Florida document number L20000238850 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Icon Energy, LLC The new name must be distinguishable and contain the words "Limited Liability Company," 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 name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address 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
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			□Remove
			□Add
			Remove
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If an eifecti <u>Note:</u> If t	date, if other than the date is listed, the date in this is effective date on the	ust be specific an block does not :	nd cannot be prior to meet the applica	to date of filing o		ler filing.) Pursuant to 6	
e record sp rd is filed.	pecifies a delayed effect	ive date, but no	ot an effective tir	me, at 12:01 a.i	n. on the earlier of:	(b) The 90th day at	fter the
Dated Se	ptember 3		2020	<u> </u>			
	/s/ Austin Elkins						
		Signature of a	member or autho	rized representat	ive of a member		

Filing Fee: \$25.00