Division of Corporations



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(((H21000335554 3)))



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Division of Corporations

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From:

Account Name : BEGALZOOM.COM INC. Account Number: 12001000062 Prone: (323)962-8600

: (323;962-3889 Fax Humber

**Enter the email address for this business entity to be used for future amount report mailings. Enter only one email address please. **Up.

Email Address:_

Page: 2 of 6

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN SOLARIA LLC

| Certificate of Status | 0 |
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COVER LETTER

| | (| COVER LETTER | |
|--|--|---|--|
| TO: Registration Se Division of Cor | | | |
| SOLARIA | LLC | | |
| SUBJECT: | Name of Limi | ted Liability Company | |
| | | | P. C. |
| The enclosed Articles of | Amendment and fee(s) are sub- | mitted for filing. | 100 to |
| Please return all correspo | ndence concerning this matter t | to the following: | . |
| | Cheyenne Moseley | | |
| | | Name of Person | |
| Legalzoom.com. Inc. | | | |
| Firm/Company | | | |
| | 101 N Brand Blvd 11th Fl | | |
| | | Address | |
| | Glendale, CA 91203 | | |
| | - | City/State and Zip Code | |
| | thiago@solariaenergysolutio | | |
| | | o be used for future annual report notific | ation) |
| For further information co | oncerning this matter, please ca | H: | |
| Cheyenne Moseley | | 800 773-0888 at () | |
| Name of | Person | Area Code Daytime | Felephone Number |
| | | | |
| Enclosed is a check for th | e following amount: | | |
| S25.00 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 Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Taliahassee, FL 32301

From: Sylvia Paull

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| SOLARIA LLC | |
|--|---|
| (Name of the Limited Liability Compar (A Florida Limited L | ny as it now appears on our records.) Lability Company) |
| The Articles of Organization for this Limited Liability Company Florida document number 09/01/2020 | were filed on L20000271964 and assigned |
| This amendment is submitted to amend the following: | |
| A. If amending name, enter the new name of the limited liab | ility company here: |
| The new name must be distinguishable and contain the words "Limited Liabit | ity 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 or registered agent and/or the new registered office address here | ffice address on our records, enter the name of the new |
| Name of New Registered Agent: | |
| New Registered Office Address: | |
| - | Enter Florida street address |
| | Florida Zip Code |
| and the second second second second second | • |
| New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered office company has been notified in writing of this change. | ce to act in this capacity. I further agree to comply with the performance of my duties, and I am familiar with and provided for in Chapter 605, E.S. Or, if this document is |

If Changing Registered Agent, Signature of New Registered Agent

To: +18506176383 ·

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2021-09-09 11 35:03 POT

LegalZoom.com, Inc.

From: Sylvia Paull

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

| Title | <u>Name</u> | Address | Type of Action |
|-------------|--------------------|---|----------------|
| AMBR | Kri, Marceło | | □ Add |
| | | 15518 Golden Bell Street Winter Garden, FL 34787 | ■ Remove |
| | | | Change |
| AMBR | Marcelo Christophe | 15518 Golden Bell Street Winter Garden, FL 34787 | Add |
| | | ··· | ☐ Remove |
| | | | ☐ Change |
| | | | Add |
| | | | □ Remove |
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| To: | 85061 | 76383 | |
|-----|-------|-------|--|
| | | | |

Page: 6 of 6 2021-09-09 11:35:03 PDT LegalZoom.com, Inc. From: Sylvia Paull D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) E. Effective date, if other than the date of filing: (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) Note: 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. 08/30 2021 Dated Signature of a member or but briged representative of a member Thiago Macedo

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Filing Fee: \$25.00

Typed or printed name of signed