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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : HILL WARD HENDERSON
Account Number : 072100000520
Phone : (813)221-3900
Fax Number : (813)200-5995

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

Email Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN LEVEL SOLAR, LLC

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T. LEMIEUX DEC - 3 2024

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability C (A Florida Li	Company as it now appears on our records.) mited Liability Company)
The Articles of Organization for this Limited Liability Com Florida document number <u>L21000148974</u>	npany were filed on March 30, 2021 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited	d liability company here:
Q&T Services of Central Florida, 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 ADDRES	(22)
Timedul office address 17997 1997 (1891) 119 Miles	
Parameter Was address Wasselfer Live	
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered of agent and/or the new registered office address here:	ffice address on our records, enter the name of the new regis
	- 1 (1) (1) (1) (1) (1) (1) (1) (1) (1) (
agent and/or the new registered office address here.	
<u> </u>	
Name of New Registered Agent:	
Name of New Registered Agent:	11: 19 11: 19
<u> </u>	Enter Florida street address
Name of New Registered Agent:	Enter Florida street address

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

To: FL Div of Corporations

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2024-11-27 21:28:16 GMT

18132005995

From: Rosemary Rohan

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	Daniel Caceres	16413 Prairie School Dr.	
		Winter Garden, FL 34787	■Remove
			□Change
MGR	Daniel Caceres	16413 Prairie School Dr.	■Add
		Winter Garden, FL 34787	□Remove
			□Change
MGR	Gonzalo Rubin	15839 Vetta Drive	∄Add
		Montverde, FL 34756	□Remove
			□Change
			□Add
			Remove
			□Change
			
		 	□Remove
			□Change
			□Add
			🗀 Remove
			□Chapue

From: Rosemary Rohan

The limited liability company i	 .			
				
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				<u> </u>
fective date, if other than the d	ate of filing:		(optional)	445.040
n effective date is listed, the date must beter. If the date inserted in this bloc				
cument's effective date on the Dep			•	
ecord specifies a delayed effective	date, but not an effective	time, at 12:01 a.m. on tl	he earlier of: (b) The 9	Oth day after the
is filed.				
November 27	2024	•		
	Cathor			
S	ignature of a member or aut	horized representative of a	member	