LZ1000159399

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

Office Use Only



300419222273

11/27/23--01023--013 ++25.00

?

- 'n

COVER LETTER

TO: Registration S Division of Co			
SUBJECT: Alpha	Power Group		
	Name of Lim	ited Liability Company	
The enclosed Articles o	f Amendment and fee(s) are sub	emitted for filing.	
Please return all corresp	oondence concerning this matter	to the following:	
	Michael Benoit		
		Name of Person	
	Alpha Power G	roup	
	_	Firm/Company	
	301 E. Pine Stree	et, Unit 840	
		Address	
	Orlando, Florid		- 1
		City/State and Zip Code	
	E-mail address: (to be used for future annual report noti	fication)
For further information	concerning this matter, please c	ail:	`
Michael Benoit	1	at (689) 500-7045 Area Code Daytim	
Name	of Person	Area Code Daytim	e Telephone Number
Enclosed is a check for	the 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 Addr.		Street Address:	etion
Registration Division of	Corporations	Registration Se Division of Cor	
P.O. Box 63	27	The Centre of T	Γallahassee
Tallahassee,	, FL 32314	2415 N. Monro	e Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Alpha Power Group, LLC		
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.) .iability Company)	
The Articles of Organization for this Limited Liability Company	were filed on 6-15-2021	and assigned
Florida document number L21000159399		
his amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
he new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "L.I.C" or the a	bbreviation "L.L.C."
Enter new principal offices address, if applicable:	301 E. Pine Street	
Principal office address MUST BE A STREET ADDRESS)	Unit 840	
	Orlando, Florida 32801	
inter new mailing address, if applicable:	301 E. Pine Street	-11
Mailing address MAY BE A POST OFFICE BOX)	Unit 840	`
	Orlando, Florida 32801	
If amending the registered agent and/or registered office a gent and/or the new registered office address here:	iddress on our records, enter the nam	
and or the new registered office address fiere.		10
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	Michael Benoit	301 E. Pine Street	XAdd
		Unit 840	□Remove
		Orlando, Florida 32801	□Change
			□Add
			□Remove
			☐ Change
	· · · · · · · · · · · · · · · · · · ·		
			□Remove
			 ☐Change ;
			□Remove
			Change
	-		□Add
			🗆 Remove
			□ Change
			□Add
			□ Remov c
			□Change

fective date, if other than the date of filing: (optional) (opti		
fective date, if other than the date of filing:		
ective date, if other than the date of filing: (optional) (optio		
ective date, if other than the date of filing:		
ective date, if other than the date of filing:		
ective date, if other than the date of filing:		
ective date, if other than the date of filing:		
ective date, if other than the date of filing:		
ective date, if other than the date of filing:		
ective date, if other than the date of filing:		
ective date, if other than the date of filing:		
ective date, if other than the date of filing:		· · ·
ective date, if other than the date of filing:		
ective date, if other than the date of filing:		
ective date, if other than the date of filing:		,
ective date, if other than the date of filing:		·
ective date, if other than the date of filing:		
ective date, if other than the date of filing: (optional)		
ective date, if other than the date of filing: (optional)		
te: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as sument's effective date on the Department of State's records. Second 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 stilled. The 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 stilled. Signature of a member or authorized representative of a member		
te: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as cument's effective date on the Department of State's records. Ecord 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 stilled. Ited November 16 Signature of a member or authorized representative of a member		·
November 16 Signature of a member or authorized representative of a member	te: If the date inserted in this block does not meet the applicable statutory filing requirements, this tument's effective date on the Department of State's records.	s date will not be listed as
Signature of a member or authorized representative of a member) The 90th day after the
	Rico	
	•	

Filing Fee: \$25.00