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



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115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

Account#: 120000000088

| Date: | 11/05/2021 | |
|--------------|-----------------------------------|----------------------|
| | Jennifer Bialowas | |
| | 1519846 | _ |
| | MUNICIPAL | SHALE V, LLC |
| | | |
| Article | es of Incorporation/Authorization | to Transact Business |
| ✓ Amen | dment | |
| ☐ Chang | ge of Agent | |
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| Authorized A | mount: 25.00 | |
| Signature: | Char | |

F: +852.2682.9790



115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

Account#: I20000000088

| Date: | 11/05/2021 | |
|--------------|-----------------------------------|----------------------|
| | Jennifer Bialowas | - |
| | 1519846 | _ |
| | MUNICIPA | SHALE V, LLC |
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| Article | es of Incorporation/Authorization | to Transact Business |
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| ☐ Fictitie | ous Name | |
| Other | | |
| | | |
| Authorized A | mount: 25.00 | |
| Signature: _ | Mer | |

F: 800.944.6607

COVER LETTER

| Division of Corporations SUBJECT: Municipal Stake V LLC Name of Limited Liability Company The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Matt Richard Name of Person Municipal Shale V, LLC NervyCompany 241 Atlant: Blvv. Se. 201 Address Me Atlant: Blvv. Se. 201 Address Michael & TowerCompany Temail address: (to be used for future annual report notification) or further information concerning this matter, please call: Matt Richard Name of Person at (904) C37 - 8808 Name of Person at (904) Daytime Telephone Number Inclosed is a check for the following amount: \$25.00 Filing Fee ©\$30.00 Filing Fee & \$555.00 Filing Fee & \$560.00 Filing Fee, | | | |
|---|--|---|--|
| The enclosed Articles of A | Amendment and fee(s) are sub | mitted for filing. | |
| Please return all correspon | ndence concerning this matter | to the following: | |
| | | latt Richard | |
| | M | nicipal Shale V. L | LC |
| | 241 Atlantic | Blvd. Ste. 201 | |
| | Ne ptime Be | eer L 322 City/State and Zip Code | 66 |
| | E-mail address: (1 | tower Comenter | Prises, con, |
| For further information co | | | · |
| Matt Ri | chard | at (904) G3° | 4-8808 |
| 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 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
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| cipal Shale V, LLC | | | |
|--|--|--|--|
| ty Company as it now appears Limited Liability Company) | ou one tecolar) | | |
| ompany were filed on | 5/17/2021 | and assigned | |
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| ited liability company her | € : | | |
| ited Liability Company," the des | ignation "LLC" or the ab | | |
| 24 | 1 Atlantic Blvd, St | te 201 | |
| ESS) | Neptune Beach, | FER 5 TO | |
| | 32266 | | |
| 24 | 1 Atlantic Blvd, St | ne 201 | |
| | Neptune Beach, | <u>` </u> | |
| | 32266 | · · · · · · · · · · · · · · · · · · · | |
| ress here: | | the name of the ner | |
| 241 Atlantic Blvd, Ste 201 | | | |
| Enter Florid | a street address | ····· | |
| Neptune Beach | , Florida | 32266 | |
| City | | Zip Code | |
| | ted liability company her ited liability Company," the desided Liability Company, the desided Liability Company and the desided Liabili | tree company as it now appears on our records. Thimsted Liability Company ompany were filed on | |

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 |
|---|----------------------|----------------------------|----------------|
| MGR | David Olson | 241 Atlantic Blvd, Ste 201 | % Add |
| | | Neptune Beach, FL 32266 | Remove |
| | | | ☐ Change |
| MGR | W. Radford Lovett II | 241 Atlantic Blvd, Ste 201 | ™ Add |
| | | Neptune Beach, FL 32266 | Remove |
| | | | Change |
| | Peter J Corry Sr. | | SEP AND |
| | | | 20 Remove |
| | | | ☐ Change |
| • | | | O Add |
| | | | ⊒ Remove |
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| in effective d | e, if other than the date of filing: te is listed, the date must be specific and cannot be late inserted in this block does not meet the ap | prior to date of fili | ng or more than 90 days a | ptional) after filing.) Pursua this date will no | unt to 605.02 It be listed |
| ocument's e | fective date on the Department of State's reco | ords. | | | |
| | pecifies a delayed effective date, but day after the record is filed. | t not an effec | tive time, at 12:0 | 1 a.m. on the | e earlier |
| ated | November 4 20 | 21 | | | |
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Page 3 of 3

Filing Fee: \$25.00