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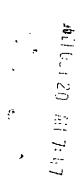
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O SIMMONS OCT 29 2021

COVER LETTER

TO:

TO: Registration S Division of Co				
WW Ener	*-			
SUBJECT:	Name of Lim	ited Liability Company		
The enclosed Articles of	of Amendment and fee(s) are sub	mitted for filing.		
Please return all corres	pondence concerning this matter	to the following:		
	Peter J. Vasti, Esq.			
		Name of Person	,,	
	Leavengood, Dauval, Boy	ria P.A.		
	***	Firm/Company		
	3900 1st Street North Suite	c 100		
	· · · · · · · · · · · · · · · · · · ·	Address		
	St. Petersburg, FL 33703			
		City/State and Zip Code		
	pvasti@leavenlaw.com			
	E-mail address: (to be used for future annual report not	ification)	
For further information	concerning this matter, please c	all:		
Peter J. Vasti, Esq.		727 488-3986		
Name	of Person	Area Code Daytin	ne 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 Registration		Street Address:	action	
	Corporations	Registration Se Division of Co		
P.O. Box 63	327	The Centre of 7	Fallahassee	
Tallahassee, FL 32314		2415 N. Monro	2415 N. Monroe Street, Suite 810	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

DELOCT 20 APT 7: 47 WW Energy, 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 07/07/2021 and assigned Florida document number L21000311560 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: 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 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

	Manual Ma	#E1 001 20 AM 7: 47	
Title	<u>Name</u>	Addica	Type of Action
AP	Nahakama Group LLC	3900 1st St N Suite 100 5, 5, 5, -	🗆 Add
		St. Petersburg FL 33703	& IRemove
			Change
MGR	William M Wynkoop	3900 1st St N Suite 201	S Add
		St Petersburg FL 33703	□Remove
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Effective date, if other than the date of filing: (aptional) (aptional) (aptional) (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 Ante: If the date inserted in this block does not meet the applicable stanutory filing requirements, this date will not be listed as document's effective date on the Department of State's records. 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 dis filed. Signature of a member or authorized representative of a member				
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		Signature of a member or authorized	representative of a member	

Filing Fee: \$25.00