21603445

(Requestor's Name)	
(Address)	
(Address)	30037590
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer.	
	Anund
Office Use Only	DEC 0 6 2021



06083

I ALBRITTON

CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 280587 8332031

AUTHORIZATION : Loud Bloman

COST LIMIT : \$ 25.00

ORDER DATE: December 3, 2021

ORDER TIME : 2:40 PM

ORDER NO. : 280587-005

CUSTOMER NO: 8332031

DOMESTIC AMENDMENT FILING

NAME: SUN ELECTRIC WORKS, LLC

EFFECTIVE DATE:

XX ARTICLES OF AMENDMENT
RESTATED ARTICLES OF INCORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Alexxis Weiland -- EXT#

EXAMINER'S INITIALS:

COVER LETTER

TO:

	Registration Sec Division of Corp			
SUBJE	com.	Works, LLC		
SOBJE	L1;	Name of Limi	ted Liability Company	
The enc	losed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please i	return all correspo	ndence concerning this matter	to the following:	
		Catherine Leisy		
			Name of Person	
		Tumpoint Services		
			Firm/Company	
		3416 Robards Court		
			Address	
		Louisville, KY 40218		0.00 Filing Fee, ertificate of Status & ertified Copy
			City/State and Zip Code	-
		catherine.leisy@tumpointse		<u>.</u>
			to be used for future annual report notification)	
For fur	ther information o	concerning this matter, please co	all:	
Cather	ine Leisy		502 888-1030 at ()	
	Name o	of Person	Area Code Daytime Telephone	Number
Enclose	ed is a check for th	he following amount:		
□ \$2.	5.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	Certified Copy Co (additional copy is enclosed) Co	0.00 Filing Fee, ertificate of Status & ertified Copy dditional copy is enclosed)
	Mailing Addres Registration S		Street Address: Registration Section	
	Division of C	orporations	Division of Corporations The Centre of Tallahassee	_
	P.O. Box 632 Tallahassee, F		2415 N. Monroe Street, S	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Sun Electric Works, LLC		
(Name of the Limited Liability Compa	iny as it now appears on our recor	<u>ds.</u>)
·		21 and assigned
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 "LLC" 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		
A. If amending name, enter the new name of the limited liab	vility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC	" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	<u> </u>	
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:	3416 Robards Court	
(Mailing address MAY BE A POST OFFICE BOX)	Louisville, KY 40218	
agent and/or the new registered office address here:	address on our records, <u>enter</u>	the name of the new registered
New Registered Office Address.	Enter Florida street addre:	3.5
	, FI	orida
	City	orida Zip Code
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 p being filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, a provided for in Chapter 605,	nd I am familiar with and F.S. Or, if this document is

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	Kurt Bratton	3416 Robards Court	≡ Add
		Louisville, KY 40218	□Remove
			□Change
AMBR	Daniel Godbey	3416 Robards Court	= Add
		Louisville, KY 40218	□Remove
			□Change
AMBR	Tim Russell	3416 Robards Court	⊟ Add
		Louisville, KY 40218	□Remove
			Change
MGR	Robert Biscardi	3400 SW 10TH STREET	
		DEERFIELD BEACH, FL 33442	≡ Remove
			□Change
			□Add
			□Change
			□ Add
			Remove
			□ Change

-					•		
_		_					
_							·
_		<u> </u>				<u> </u>	
_							
_							
_							
_				_	<u></u>		
_							. <u></u>
	·				···		
_							
				 -	···········.		
_			<u></u>				
-						<u> </u>	
_							
Note: I	re date, if other to ctive date is listed, the f the date inserted nt's effective date	in this block doe	s not meet the a	pplicable statu	HILLING OF BROKE GRAD	(optional 90 days after filing rements, this date) 3.) Pursuant to 605.020 e will not be listed a
f the record ecord is file		l effective date, t	out not an effect	ive time, at 12	:01 a.m. on the	earlier of: (b) T	he 90th day after th
Dated_	November 23rd		· 2021	. <u>. </u>			
		Vension	e of a member or	authorized reni	esentative of a m	ember	

Filing Fee: \$25.00