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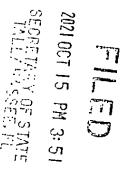
(Re	questor's Name)	
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	





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COVER LETTER

TO:

TO: Registration Se Division of Co			4 .			
; Solarian L	LC					
SUBJECT:	Name of Lin	ited Liability Company				
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.				
Please return all correspo	ondence concerning this matter	to the following:				
	Jacqueline Quiroga					
		Name of Person			2021	
	ZenBusiness INC				0CT	=
		Firm/Company			5	Ī
	5511 Parkerest Drive STE	. 103		100 100 100 100 100 100 100 100 100 100	2021 OCT 15 PM 3:5	i i
		Address		STA E.F.	ယ္ က	•
	Austin, Texas, 78731				-	
	fulfillment@zenbusiness.co	City/State and Zip Code				
	E-mail address: (to be used for future annual report no	ification)			
For further information of	concerning this matter, please c	all:				
Jacqueline Quiroga c/o	ZenBusiness INC	844 493-6249 at ()				
Name o	of Person	Area Code Daytir	ne Telephone Nur	nber		
Enclosed is a check for t	he following amount:					
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Ceni Ceni	0 Filing Fee ficate of Sta fied Copy ional copy is en	tus &	
Mailing Addre Registration Division of C P.O. Box 63: Tallahassee.	Section Corporations 27	Street Address: Registration Se Division of Co The Centre of 2415 N. Monre	rporations Tallahassee	e 810		
	· · · - • · ·	Tallahassee, F		•		

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Solarian LLC		
(Name of the Limited Liability Comp (A Florida Limited	any as it now appears on our records.) Liability Company)	
the Articles of Organization for this Limited Liability Compan	y were filed on 09/17/2021	and assigned
lorida document number 1.21000413016		
his amendment is submitted to amend the following:		
. If amending name, enter the new name of the limited lia	bility company here:	
Solarsy LLC	_	
he new name must be distinguishable and contain the words "Limited Liab	oility Company," the designation "LLC" or the	abbreviation "L.L.C."
inter new principal offices address, if applicable:	3	: 15
Principal office address MUST BE A STREET ADDRESS)		<u> </u>
		58 or 1
	C	
Enter new mailing address, if applicable:	<u> </u>	
Mailing address MAY BE A POST OFFICE BOX)		<u> </u>
3. If amending the registered agent and/or registered office	address on our records, enter the na	me of the new regist
gent and/or the new registered office address here:		
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 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
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Effective date, if other than the difference date is listed, the date must be Note: If the date inserted in this block document's effective date on the Dep	e specific and cannot be p k does not meet the ap	plicable statutory	or more than 90 days at			
e record specifies a delayed effective of is filed.	late, but not an effectiv	ve time, at 12:01 a	.m. on the earlier of:	(b) The 90	nh day af	ter the
Dated October 14th	. 2021	<u>. </u>				
	/s/Vaa	'um Baranets				
	gnature of a member or a	Ų.				

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Filing Fee: \$25.00