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SECRETARY OF STATE

Registration Section

Tallahassee, FL 32314

TO:

COVER LETTER

Division of Cor	rporations		
	NERGY CONSTRUCTION LI	.C	
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
	ondence concerning this matter		
ricase return an correspo	indence concerning and matter	to all following.	
	Gil Sanchez, Esq.		
		Name of Person	
	Black Rock Trial Lawyers	, LLC	
		Firm/Company	
	201 S. Westland Ave.		
		Address	
	Tampa, FL 33606		
		City/State and Zip Code	· - -
	gil@blackrocklaw.com		
	E-mail address: (to be used for future annual report not	ification)
For further information of	concerning this matter, please co	all:	
Gil Sanchez, Esq.		813 254-1777 at ()	
Name o	of Person	Area Code Daytin	ne Telephone Number
Enclosed is a check for t	he following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	(additional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addre Registration Division of C	Section Corporations	Street Address: Registration Se Division of Co	rporations
P.O. Box 631	27	The Centre of	t attahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

CLEAN ENERGY CONSTR	JCTION LLC		
(Name of the	Limited Liability Compa	INV as it now appears on our record-	
			J
The Articles of Organization for this Limite	d Liability Company	were filed on 10/15/2021	
Florida document number L21000450285			and assigned
This amendment is submitted to amend the	following:		
A. If amending name, enter the new nam	e of the limited liabi	lity company here:	
manie aidst be distinguishable and contain the	ne words "Limited Liabilit	y Company," the designation "LLC" o	t the abbreviation of the Ch
- and her principal offices address, if app	licable:		are aboreviation L.U.C."
(Principal office address MUST BE A STR.	ending name, enter the new name of the limited liability company here: me must be distinguishable and contain the words "Limited Liability Company." the designation "LLC" or the abbreviation "L.L.C." w principal offices address, if applicable: Loffice address MUST BE A STREET ADDRESS) mailing address, if applicable: didress MAY BE A POST OFFICE BOX) diding the registered agent and/or registered office address on our records, enter the name of the new registered or the new registered office address here: Black Rock Trial Lawyers, LLC w Registered Office Address: Enter Florida street address Tampa Florida 33606		
	3,030)		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFIC	F ROY	·	
	<u>C BOX)</u>		
B. If amending the registered agent and/or	registered office add	leach on an	-
agent and/or the new registered office addr	ess here:	ness on our records, enter the	name of the new registered
Name of New Registered Agent:	Black Rock Trial [awyers, LLC	
New Registered Office Address:	201 S. Westland A	ve.	
		Enter Florida street address	
	Tampa	Florida	33606
New Registered Agent's Signature, if changing		City	Zip Code
The I	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
COO	Michael O'Sullivan	4510 Belcrest Way	□Add
		Cumming, GA 30040	Remove
			Change
			□Add
			□Remove
			□Add
			□Remove
			□Change
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ite: If the	ate, if other than the date is listed, the date mus date inserted in this bl effective date on the D	ock does not meet	t the applicable s	of filing or more thattory filing rec	(option an 90 days after fill uirements, this d	al) ing.) Pursuant to 60 ate will not be lis)5.020 sted a
ecord spe is filed.	cifies a delayed effectiv	e date, but not an	effective time, a	: 12:01 a.m. on th	e earlier of: (b)	The 90th day aft	er the
ted	8/2/2024		<u> </u>				
			Oocu Sig				
-		Signature of a mem	nber or authorizant	O'Sullivan rep iases iative of a	member		
	vlichael O'Sullivan						

Filing Fee: \$25.00