L22 000024834

(Requestor's Name)			
(Address)			
(Address)			
(Audiess)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
· ———			
Special Instructions to Filing Officer:			

Office Use Only



800393545378

na/31/22--01014--018 **39.00

2022 AUG 31 AM 8: 18
SECRETARY OF STATE
TALL ALLACREE

COVER LETTER

TO:	Registration Sec Division of Corp	orations .			
٠		Pa	L'am FMerall	110	
SUBJE	CT:	Name of Limit	ofgm Energy ted Liability Company		
The end	closed Articles of A	mendment and fee(s) are subt	nitted for filing.		
Please	return all correspon	dence concerning this matter t	o the following:		
		An	Name of Person		
		Paradign	Frencompany (-4	
		1075	NE 13 ^{LA} Address	Flace	
		Ganesville	City/State and Zip Code Nene-gy//	anail.com	
For the	ther information co	ncerning this matter, please ca		·J	
	Andrew Name of	Ward	at (776) 6 d Area Code Daytin	1 - 4422 ne Telephone Number	
Enclose	ed is a check for the	following amount:			
□ \$2.	5.00 Filing Fee	\$30,00 Fiting Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy PAICING 31) ALL	ال.
	Mailing Address Registration S Division of Co P.O. Box 6327 Tallahassee, F	ection orporations 7	Street Address: Registration Se Division of Co The Centre of 2415 N. Monra Tallahassee, F	ection SSP & Corporations Tallahassee Coc Street. Suite 81077 & Coc	コフ

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ZOZZ AUG 31 AM 8 1 SECRETARY OF STALLAHASSEE, FI

(Name of the Limited Lightlity Company as, it how appears on our records.)	SEE.	AH 8	Ö
(Name of the Limited Liability Company as it how appears on our records.) (A Florida Limited Liability Company)	L.7.	8	
The Articles of Organization for this Limited Liability Company were filed on Aug. 2946	702	Z and as	signed
Florida document number $2200000000000000000000000000000000000$	7		-

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 "Lim	nited 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 ADDI	1675 NE 13th Place RESS) Gaines ville FL 37661
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1075 NE 13th Place Gainesville FL 32601
B. If amending the registered agent and/or registere agent and/or the new registered office address here:	d office address on our records, enter the name of the new registered
Name of New Registered Agent:	pencer Sadler d75 NE 13th Place
New Registered Office Address:/	175 NE 13th Place
_G	City Florida 3261

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

Title	Name	Address	Type of Action
MBR	Daniel Jelanti	2523 Monterey Cox	<u>+</u> ⊐∧dd
		Weston, FL. 3337.7	
			□Change
AMBR	Spercer Sadier	1675 NE 134 Place	VAdd
		Gainesville, FL. 32641	□Remove
		1-1741844479	□Change
			□∧dd
			□Remove
			□Change
			□Add
			□Remove
			□Change
		TALL	JECRE JARY
			Hemove!
		A S S S S S S S S S S S S S S S S S S S	∰Chaij g œ U
			□Remove
			= 三Change

· · · ,			P
. If amending any other information, enter change(s)	here: (Attach additiona	al sheets, if necessary.,)
			/
address for Andrew	Ward 1	Fram 47	1 5014
Meadow Circle #3	_		_
to new updated	1 '	•	
is (\$75 NE			
Gainesville FL			
	<u> </u>		
			 -
			
			··· ·
			
			
		<u></u>	
Effective date, if other than the date of filing:		(optional)	
(If an effective date is listed, the date must be specific and cannot be parties). If the date inserted in this block does not meet the ap	orior to date of filing or more	than 90 days after filing.) I	Put Quant 22505.0207 (3)(b)
document's effective date on the Department of State's reco	ords.	[- 	RET NG
the record specifies a delayed effective date, but not an effective	ve time, at 12:01 a.m. on	the earlier of: (b) The	∰ ω
cord is filed.		ιυ :υ :Ω	
Dated 08/29/7022 , /	Hr	- 	8:18 9:18
·	1/0/	·	. —
Signature of a member of a	futhorized representative of	a member	
And and 11	lacal		
Typed or p	rinted name of signee		