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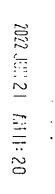
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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COVER LETTER

	gistration Sec vision of Corp					
CUBICT.	Clay Solar, I					
Name of Limited Liability Company						
The enclosed	d Articles of A	mendment and fee(s) are sub-	mitted for filing.			
Please return	n all correspon	dence concerning this matter	to the following:			
		Karen Lazarek-Simison				
			Name of Person			
			Firm/Company			
		4242 Sandhill Crane Terra	ce.			
			Address			
		Middleburg				
			City/State and Zip Code			
		karen.simison@gmail.com				
		E-mail address: (1	to be used for future annual re	eport notification)		
For further i	nformation co	ncerning this matter, please ca	all:			
Karen Laza	rek-Simison		904 525	-3961		
	Name of	Person	Area Code	Daytime Telepho	ne Number	
Enclosed is	a check for the	e following amount:				
■ \$ 25.00 i	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 Address:
Registration Section
Division of Corporations P.O. Box 6327

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 Mt Marria Carra Culta 010

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2022 3011 21 7.11111: 20

Zip Code

Clay Solar, LLC	
(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)	ı
(A Florida Limited Liability Company)	
The Articles of Organization for this Limited Liability Company were filed on 03/08/2022 and assigned	
Florida document number 1.22000119032	
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 "L.L.C." 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:	
(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 regis	tered
Name of New Projectors J.A. 1994	
Name of New Registered Agent:	_
New Registered Office Address: Enter Florida street address	
, Florida	

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.

City

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	Orlando Gutierrez	11942 Old Moss Lane	■ Add
		Middleburg, F1. 32068	□Remove
			□Change
			□Add
			□ Remove
			□Change
			□Add
			□Remove
			□Change
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			Change
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an effectiv fote: If the ocument	ve date is listed, the date inserted in serted in serted in serted in serted in serted in the date in the serted i	than the date he date must be sp d in this block do e on the Departm	of filing:ecific and cannot es not meet the ent of State's i	e applicable s records.	tatutory filing r	equirements, thi	filing.) Pursuant t s date will not b	e listed as t
record sp is filed.	ecifies a delay	ed effective date,	but not an effe	ective time, a	12:01 a.m. on	the earlier of: (b) The 90th day	after the
ated	ne 15th	A Gignat	2022		representative of	a member		_

Filing Fee: \$25.00