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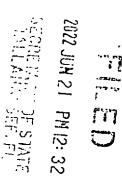
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COVER LETTER

Division of Cor		•	
SOLAR SO	OCIETY LLC	· .	
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	ANTHONY D. WARD		
		Name of Person	
	SOLAR SOCIETY LLC		
		Firm/Company	
	18130 Villa Creek Drive		
	18130 Villa Creek Drive Address Tampa, Fl. 33647		
	Tampa, Fl. 33647		
		City/State and Zip Code	
	worldwideward00@outlook E-mail address: (c.com to be used for future annual report notificat	ion)
For further information c	oncerning this matter, please co		
Anthony D. Ward		813 405-5059	
Name o	f Person	at () Area Code Daytime Te	lephone Number
Enclosed is a check for the	he following amount:		
□ \$25.00 Filing Fee	■ \$30.00 Filing Fec & 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 5		Street Address: Registration Section	on

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2022 JUN 21 PH 12: 32

SOLAR SOCIETY LLC

(Name of the Limited Liability Company as it now appears on our records:) (A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability	y Company	were filed on March 1	0, 2022	and assigned
Florida document number L22000122566	·			
This amendment is submitted to amend the following	<u>;</u> :			
A. If amending name, enter the new name of the l	limited liab	oility company here:		
N/A				
The new name must be distinguishable and contain the words "I	Limited Liabi	ility Company," the designa	tion "LLC" or the abb	reviation "L.L.C."
Enter new principal offices address, if applicable:		N/A		
(Principal office address MUST BE A STREET AD	DRESS)		_	
Enter new mailing address, if applicable:		N/A		
(Mailing address MAY BE A POST OFFICE BOX)	1			
				
B. If amending the registered agent and/or registe	ered office	address on our record	ls. enter the name	of the new registered
agent and/or the new registered office address her				
Name of Navy Registered Assets N/	A			
Name of New Registered Agent:	· \			
New Registered Office Address:				
		Enter Florida str	eet address	
			Florida	
		Ciţy		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
AMBR	ldris E. Abdullah	9513 Delaney Creek Blvd. Apt 401	□Add
		Tampa. FL 33647	≣Remove
			□Change
			□Add
			□Change
			Remove
			Change
		<u></u>	□Add
			□Remove
			Change
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ective date, if other than the effective date is listed, the date meter. If the date inserted in this unient's effective date on the	ust be specific and cannot be block does not meet the a	prior to date of filing opplicable statutory f	or more than 90 days after h	ling.) Pursuant to 605.020
cord specifies a delayed effect s filed.	ive date, but not an effect	ive time, at 12:01 a.	m. on the earlier of: (b)	The 90th day after the
April 15	2022			
ed '				
ed				
ed .	Signature of a member or	authorized representa	ntive of a member	