L22000357283

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A. PARISHANI DEC 0 9 2023

COVER LETTER

TO: Registration So Division of Con			
	F-GRID LLC		
SUBJECT:	Name of Lim	ited Liability Company	
	Amendment and fee(s) are sub		2023 NOV 27
	Elyse Bates	N. SD	PH 1: 3: GF STALL GF CRAFILLA CLEUCHULA
		Name of Person	
	ATOM OFF-GRID LLC		
		Firm/Company	
	PO BOX 7084		
		Address	
	Winter Haven, Florida 338	x3-7(%4	
	elysemeetswest@gmail.con E-mail address: (City/State and Zip Code to be used for future annual report notifi	cation)
For further information of	concerning this matter, please ca	all:	
Elyse Bates		863 289-5404 at ()	
Name (of Person	Area Code Daytime	Telephone Number
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)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addre Registration Division of O P.O. Box 63: Tallahassee,	Section Corporations 27	Street Address: Registration Sec Division of Corp The Centre of Ta 2415 N. Monroe Tallahassee, FL	oorations allahassee : Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PILED

2023 NOV 27 PM 1: 3 dsigned

1. ALLER OF CORPORATION

1. ALLER ASSEE FLORIDS

1. ALLER ASSEE FL

ATOM OFF-GRID LEC

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 Company were filed on August 15, 2022 Florida document number <u>L22000357283</u> This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Joule Mine LLC 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: (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 registered agent and/or the new registered office address here: Name of New Registered Agent. New Registered Office Address: Enter Florida street address City

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>	<u>Address</u>	Type of Action
			□Add
			□ Change
			□Remove
			□Change
			□Add
			2023 HOV 2 7 Charge
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		∃Remove	
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			□Remove

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	2023 NOV
	SSC 27
	CORNER 37
	
ffective date, if other than the date of filing: an effective date is listed, the date must be specific and cannot be prior to date of filing tote: If the date inserted in this block does not meet the applicable statutory ocument's effective date on the Department of State's records.	(optional) or more than 90 days after filing.) Pursuant to 605.020 filing requirements, this date will not be listed a
record specifies a delayed effective date, but not an effective time, at 12:01 a is filed.	a.m. on the earlier of: (b) The 90th day after the
ated November 20 . 2023	
Signature of a member or authorized represent	tative of a member