L22000521294

| (R | equestor's Name) | |
|-------------------------|---------------------|-----------|
| (A | ddress) | |
| (A | ddress) | |
| (C | ity/State/Zip/Phone | #) |
| PICK-UP | ☐ WAIT | MAIL |
| (B | usiness Entity Name | e) |
| (D | ocument Number) | |
| Certified Copies | Certificates | of Status |
| Special Instructions to | Filing Officer: | · |
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| то: | | | | • |
|------------------|---|--------------------------------|-------------------------|--|
| O | | LLC | | |
| SOBJEC | JI: | Name of Lim | nited Liability Company | |
| The encl | osed Articles of | Amendment and fee(s) are sub | omitted for filing. | |
| Please re | eturn all correspo | ondence concerning this matter | to the following: | |
| | | Brijesh Anghan | | |
| | | | Name of Person | |
| | Division of Corporations Jimi Sohar LLC Name of Limited Liability Company | | | |
| | | | Firm/Company | |
| | | 326 Bellview PL | | |
| | | | Address | |
| | | Sanford/FL 32771 | | |
| | | | | |
| | | | | ort notification) |
| For furth | er information o | | • | |
| Brijesh A | Anghan | | | |
| | Name (| of Person | Area Code I | Daytime Telephone Number |
| Enclosed | l is a check for t | he following amount: | | |
| ■ \$2 5.0 | 00 Filing Fee | | Certified Copy | Certificate of Status & Certified Copy |
| | | | | |
| | | | | |
| | P.O. Box 631 | • | | • |

Tallahassee, FL 32314

2415 N. Monroe Street. Suite 810 Tallahassee, FL 32303

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| Jimi Solar LLC | | |
|--|---|-------------------------------|
| (<u>Name of the Limited Liability Com</u> (A Florida Limite | ipany as it now appears on our record d Liability Company) | <u>(s.</u>) |
| The Articles of Organization for this Limited Liability Comparison document number <u>L22000521294</u> . | ny were filed on 12/13/2022 | and assigned |
| This amendment is submitted to amend the following: | | |
| A. If amending name, enter the new name of the limited lia | ability company here: | |
| Jini Solar LLC | | ~ |
| The new name must be distinguishable and contain the words "Limited Lic | ibility Company," the designation "LLC | or the abbreviation: L.L.C." |
| Enter new principal offices address, if applicable: | | |
| Principal office address MUST BE A STREET ADDRESS) | - | - SS - M |
| Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | | PH 2: 22 SSEE. FL |
| 3. If amending the registered agent and/or registered office and/or the new registered office address here: Name of New Registered Agent: | e address on our records, <u>enter</u> | the name of the new registere |
| New Registered Office Address: | | |
| | Enter Florida street addres | s/s |
| | , Fl | orida |
| | City | 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 Changing Registered Agent, Signature of New Registered Agent

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II amending Authorized rerson(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 | <u>Name</u> | Address | Type of Action |
|-------|-------------|-------------|----------------|
| | | | □Add |
| | | | □Remove |
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| | ending any other information, enter change(s) here: (Attach additional sheets, if necessary.) |
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| fan ei Note: | tive date, if other than the date of filing: |
| e reco rd is t | rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the iled. |
| Dated | 12/16/2022 |
| | Docadagement by |
| | Signature of a member or authorized representative of a member |
| | Brijesh Anghan |
| | Typed or printed name of signee |

Filing Fee: \$25.00