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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : 120090000081

Phone

: (307)200-2803

Fax Number

: (813)436-5206

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

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# LLC AMND/RESTATE/CORRECT OR M/MG RESIGN ANDREAS HASLINGER LLC

Certificate of Status	0		
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K. SALY

1 8 2025

Feb 17, 2025 01:56

To: +18506176383 Page: 2/4

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



### ANDREAS HASLINGER 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 Company v	vere filed on <u>01/18/</u> 2	2023 and assigned
Florida document number L23000034360		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabil	ity company here:	
Greenx LLC		
The new name must be distinguishable and contain the words "Limited Liabilit	y Company," the designation	n "LLC" 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 adagent and/or the new registered office address here:  Name of New Registered Agent:	idress on our records,	enter the name of the new registered
New Registered Office Address:	Enter Florida stree	address
	Imer I what siree	
	City	, Florida Zip Code
New Registered Agent's Signature, if changing Registered Agent:	ov,	<b>- - - - - - - - - -</b>
	a to got in this eargeit	y I further garee to comply with the
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete p accept the obligations of my position as registered agent as pr being filed to merely reflect a change in the registered office a company has been notified in writing of this change.	erformance of my dut ovided for in Chapter	ies, and I am familiar with and 605, F.S. Or, if this document is
If Chang	ing Registered Agent, Sign	ature of New Registered Agent

Feb 17, 2025 01:56 To: +18506176383 Page: 3/4 Fax: 18134365206

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 = M $AMBR = A$	anager uthorized Member		4J25 FEB 17 D	<i>)</i>
<u>Title</u>	Name	Address	ALLAHASSEE FLOOR	Type of Action
<u>-</u>				□Remove
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□ Change

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