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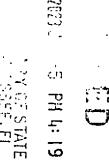
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R. HUNT 07/05/23

COVER LETTER

TO: Registration Division of C	Section Corporations	• • • • • • • • • • • • • • • • • • •	*	•		
	MITY SOLAR CONSULTING, L	LC.				
SUBJECT:	Name of Lin	nited Liability Company				
	of Amendment and fee(s) are subspondence concerning this matter	-				
	COREY CREECH					
		Name of Person	<u>.</u>			
		Firm/Company				
4604 49TH ST N SUITE 1146						
		Address		-88A-0	ال H	urer.
	SAINT PETERSBURG, F	L 33709		E ST	PM 4: 19	C
	corey@nexusenergyconsult	City/State and Zip Code ing.com		- FAE	9	
		to be used for future annual report notif	ication)			
	n concerning this matter, please c					
COREY CREECH		at ()				
Nam	ne of Person	Area Code Daytime	: Telephone Numbe	er		
Enclosed is a check for	or the following amount:					
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certifie	ate of Statu		
Mailing Add Registratio		Street Address: Registration Sec	tion			
•	f Corporations	Division of Corp The Centre of T	oorations			

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PROXIMITY SOLAR CONSULTING, 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 were filed on [01/24/2023] and assigned Florida document number [L23000043795]

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

NEXUS ENERGY CONSULTING, LLC.

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

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:

New Registered Agent's Signature, if changing Registered Agent:

Name of New Registered Agent:

New Registered Office Address:

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

Enter Florida street address

, Florida

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
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Filing Fee: \$25.00