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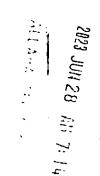
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Special Instructions to	Filing Officer:	
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Office Use Only



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COVER LETTER

TO:

Registration Section

Division of Cor	porations		
SUBJECT:	Solar Power 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:	
	Leroy Darden		
		Name of Person	
	Hurricane Solar Power LL	c	
		Firm/Company	
	8515 SW 129 Terrace		
		Address	
	Miami FL 33156		
		City/State and Zip Code	
	d.darden@hurricanewindov		
	E-mail address: (to be used for future annual report not	fication)
For further information of	concerning this matter, please c	all:	
Leroy Darden		786 525-1466 at ()	
Name o	of Person	Area Code Daytin	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 Se Division of Co The Centre of 2415 N. Monro Tallahassee, FI	rporations Fallahassee be Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

Final **OF**

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	stered office a ere: Dwight Ebanks 515 SW 129 To	stered office address on our ere: Dwight Ebanks 515 SW 129 Terrace Enter Fl	stered office address on our records, enterere: Dwight Ebanks 515 SW 129 Terrace Enter Florida street addre

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

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
MGR	Leroy Darden	8515 SW 129 Terrace	= Add
		Miami Fl 33156	Петоve
		8515 SW 129 Terrace	□ Change
MGR	Dwight Ebanks	Miami Fl 33156	■Add
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effective date is listed, the date must be stee. If the date inserted in this block of	pecific and cannot be prior to date	of filing or more than 90 day	s after filing.) Pu	rsuant to 605.020 Lnot be listed as
rument's effective date on the Depart	ment of State's records.	actions in ing requirement		
cord specifies a delayed effective dat s filed.	e, but not an effective time, at	12:01 a.m. on the earlier	01: (b) The 9	oun day after the
ed May 22)		
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