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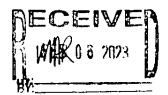
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Office Use Only



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## **COVER LETTER**

TO: Registration : Division of C				
SUBJECT:	Solar Harmony	LLC		
	Name of Lim	ited Liability Company		
The enclosed Articles of	of Amendment and fee(s) are sub	mitted for filing.		
	pondence concerning this matter			
r reaso retarn an corres	yo			
	<u></u>	Se L Garcia		
		Har Many Firm/Company		
		perfield oaks Dr		
		Address	——————————————————————————————————————	
	Zenhyrhills	FL 33541 City/State and Zip Code		
	<del>-      </del>	City/State and Zip Code	5 C 4	
	Tellme 8	SSQ hotmail.com		
For further information	E-mail address: ( concerning this matter, please c	to be used for future annual report noti all:	fication) FE STATE	
Jose	Garcia	at ( 727 ) 277	- 4969	
Name	of Person	Area Code Daytim	e Telephone Number	
Enclosed is a check for	the 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 Addr		Street Address:	ction	
Registration Section Division of Corporations		Registration Section Division of Corporations		
P.O. Box 6327		The Centre of T	The Centre of Tallahassee	
Tallahassee, FL 32314		2415 N. Monro	2415 N. Monroe Street, Suite 810	

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Solar Harmony			
(Name of the Limited Liability Company as it now app (A Florida Limited Liability Company	ears on our records.)		
The Articles of Organization for this Limited Liability Company were filed on Clorida document number <u>L23 0000 74740</u> .	February 09, 2023 and assigned		
his amendment is submitted to amend the following:			
. If amending name, enter the new name of the limited liability company	here:		
he new name must be distinguishable and contain the words "Limited Liability Company," th	e designation "LLC" or the abbreviation "L.L.C."		
nter new principal offices address, if applicable:			
Principal office address MUST BE A STREET ADDRESS)			
nter new mailing address, if applicable:	णाड़ भारत		
Mailing address MAY BE A POST OFFICE BOX)	, <u>L</u>		
. If amending the registered agent and/or registered office address on our gent and/or the new registered office address here:	r records, <u>enter the name of the new regis</u>		
Name of New Registered Agent:			
New Registered Office Address:  Enter F	Florida street address		
	. Florida		
City	, FIORIGA 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

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

Title	<u>Name</u>	Address	Type of Action
MGR	Jose L Garcia	351360 Deer Field Oaks Dr	thradd
		35136 Deer Field Oaks Dr Zephyhills, FL 33541	□Remove
			Change
			□Add
			□Remove
			Change
			Add - Add
			□ Add □ Remove □ □ Change
			□Add
			□Remove
			□Change
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			□Remove
			Change
		<del></del>	□Add
			□Remove
			□ Change