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To:

Division of Corporations

Fax Number : (850)617-6383

From:

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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 😒 ELAVATED ENERGY LLC

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Tallahassee, FL 32314

COVER LETTER

TO: Registration S Division of Co			
CHOICE.		ED ENERGY LLC	
SUBJECT:		nited Liability Company	
The enclosed Articles o	f Amendment and fee(s) are sub	omitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	LOVETTE DOBSON		
		Name of Person	
		Firm/Company	· · · · · · · · · · · · · · · · · · ·
Firm/Company 17350 STATE HWY 249 STE 220 Address HOUSTON, TX 77064			
		Address	
	HOUSTON, TX 77064		
	EFILE1234@INCFILE.CO		
For further information (E-mail address: (concerning this matter, please c	to be used for future annual repo aff;	rt notification)
LOVETTE DOBSON			2-3453
Name	of Person	Area Code L	Paytime Telephone Number
Enclosed is a check for t	he following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addre Registration Division of C	Section Torporations		n Section Corporations
P.O. Box 632	27	The Centre	of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

(((H23000202297 3)))

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

ELAVATED E	ENERGY LLC		
(<u>Name of the Limited Liability Compar</u> (A Florida Limited L	ty as it now appears tability Company)	on our records.)	
The Articles of Organization for this Limited Liability Company	were filed on	04/11/2023	and assigned
Florida document number			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabi	lity company her	<u>e</u> :	
ELEVATED ENERGY LLC			
The new name must be distinguishable and contain the words "Limited Liabili	ty Company," the des	ignation "LLC" or th	c abbreviation "L.L.C."
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)			
			. en
			-
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	ddress on our rec	ords, <u>enter the n</u>	ame of the new registered
agent and/or the new registered office address here.			
Name of New Registered Agent:			
Name of New Registered Agent.	·		ČŠ
New Registered Office Address:	Fator Florid	a street address	<u> </u>
	Emili Fioridi	a sreet maress	ف 'ر
		, Florida	
	Cuy		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

6/5/2023 10:35:38 CDT

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
AMBR	YAE SEUL PARK	4112 FARMSIDE DR	
		NOTTINGHAM, MD 21236	
			□Change
			□Add
			□Remove
			Change
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ective date, if other than the da reffective date is listed, the date must be ter. If the date inserted in this block aument's effective date on the Depa	specific and cannot be prior does not meet the applications.			
cord specifies a delayed effective d s filed.	ate, but not an effective to	ne, at 12:01 a.m. on the	e earlier of: (b) The 90th c	lay after the
1UNE 05TH	2023	·		
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`1;	mature of a member or mithe	erized representative of a i	nember	

Filing Fee: \$25.00