L23000384443

(Re	questor's Name)	
(Ad	dress)	<u> </u>
	dress)	
(Cit	y/State/Zip/Phone	× #)
(2	ji ototo, zipir none	· ··)
		MAIL
(Business Entity Name)		
(Do	cument Number)	
Certified Copies	_ Cennicates	of Status
Special Instructions to	Filing Officer.	

Office Use Only



09/18/28--01029--003 ++29.00

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INT

COVER LETTER

0: Registration Section 'Division'of Corporations

*N moster ENERGY LLC OLUTIONS **UBJECT:** Name of Limited Liability Company

he enclosed Articles of Amendment and fee(s) are submitted for filing.

lease return all correspondence concerning this matter to the following:

for further information concerning this matter, please call:

ABLICK Milen at (<u>385</u>) Area Code **439-9597** Daytime Telephone Number Name of Person

inclosed is a check for the following amount:

¥ \$25.00 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)

ł

Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT	
TO	
ARTICLES OF ORGANIZATION	
OF	
(Name of the Limited Liability Company as it now appears on our r	avords)
(A Florida Limited Liability Company)	
he Articles of Organization for this Limited Liability Company were filed on 8/1	5/27 and assigned
1	and assigned
orida document number <u>L23000384443</u>	
his amendment is submitted to amend the following:	
re i' a di a cana dala farita di batta da di seria di batta	
. If amending name, enter the new name of the limited liability company here:	
te new name must be distinguishable and contain the words "Limited Liability Company," the designation	
te new name must be distinguishable and contain the words "Limited Liability Company," the designation	LLC or the abbreviation 1.1.C.
nter new principal offices address, if applicable:	
<u> Principal office address MUST BE A STREET ADDRESS)</u>	
	<u> </u>
	283 S 1
nter new mailing address, if applicable:	
Mailing address MAY BE A POST OFFICE BOX	
Maning address MAT BE A FOST OFFICE BOX	
. If amending the registered agent and/or registered office address on our records, g	ntor the name of the new Projectored
ent and/or the new registered office address here:	inter the name of the new registered
Name of New Registered Agent:	
	······································
New Registered Office Address:	····
Enter Florida street a	<i>iddress</i>

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

hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the rovisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and ccept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is ing filed to merely reflect a change in the registered office address. I hereby confirm that the limited liability impany has been notified in writing of this change.

City

If Changing Registered Agent, Signature of New Registered Agent

, Florida ______ ZipCode

f amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person</u> being added r removed from our records:

4GR = Manager MBR = Authorized Member

<u>`itle</u>	Name	Address	Type of Action
ngra	ANDREN MILEAN	13130 56TH COVET N	% Add
		SUITE 607	🗆 Remove
		CLEARWATER, FL 33760	🗆 Change
NGRN	RICHARD WIRTHIN	13130 56TH COURT	Add 🏷
		SUITE 607	🗆 Remove
		CLEAR WATER, FL 33760	🗋 Change
<u> 1GP-M</u>	EVAN RADEMAKER	13130 561H COURT	⋟∼ ∆dd
		SUTTE 607	🗆 Remove
		CLEMENMER, FL 32760	🗆 Change
<u> 16 pm</u>	KOLBY NEWON	13130 567H COVET	lÆAdd
		SVIITE 607	DRemove
		CLEMMATER, FL 33760	Change
			🗌 Add
			🗆 Remove
			Change
			🗆 Add
			🗆 Remove
			□Change

If amending any other information, enter change(s) here: (Allach additional sheets, i) necess	any other information, enter change(s) here: (Attach additional sheets, if necessar	37.
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Effective date, if other than the date of filing: ________(optional) (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records,

he record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the ord is filed.

Dated CEPTEMBER 12 2023	
Signature of a member or authorized representative of a member ANDREN PATRICK MCLERN	NETA SEP 18
Typed or printed name of signee	AN11:2