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DATE:

12/06/2023

NAME: SUNWORXS LLC

TYPE OF FILING: AMENDMENT

COST:

25.00

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ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL HODGE

COVER LETTER

TO: Registration S Division of Co			
	6	1.7	
SUBJECT:	<u>Summorxs L</u>	<u>.L.C</u>	
	Name of Lir	nited Fability Company	
The enclosed Articles of	Amendment and fee(s) are sul	bmitted for filing.	
Please return all correspond	ondence concerning this matter	to the following:	
	MAR	LTANA BIDDY	
		Name of Person	
		111 112	
		Firm'Company	
	1337 NW 2	9th TER	
	A I	Auditess .	,
	/UIAL	II. Florida 3314	12
	11.00	Chystate and Zip Code Haneauner & Gyn	• 1
	h-mail address:	(to be used for future annual report notif	alticom lication)
For further information of	concerning this matter, please o	call:	
MARTANA	BIODY	at (786) 519-	<i>5</i> 579
Name o	of Person		: Telephone Number
Enclosed is a check for t	he following amount:		
\$25.00 Filing Fee	□ \$30.00 Filing Fee &	☐ \$55.00 Filing Fee &	☐ \$60.00 Filing Fee,
	Centificate of Status	Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy tadditional copy is enclosed:
Mailing Addre	<u>ss:</u>	Street Address:	

Registration Section
Division of Corporations
P.O. Box 6327 Tallahassee, FL 32314

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

Sunworks LLC		
(Name of the Limited Liability Comp. (A frontal in red	any as it now appears on our Liability Company)	records.1
The Articles of Organization for this Limited Liability Company Florida document number <u>1–23 00053 5723</u> .	were filed on $12/0$	4/2023 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	oility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	ility Company," the designation	on "LLC" or the 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)		
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records.	enter the name of the new registers
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida stree	address
	City	, Florida
	C uy	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 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	Name	Address X4h Ter	Type of Action
AMBIZ	MARTANA BIDDY	Mikimi, FL 33142	Wadd
			DRemove
			□ Change
			□Add
			Remove
			□Change
			🗆 Add
			□Remove
			
			□Remove
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			□Remove
			□ Change
			□Add
			Remove
			Change

• • • •	
D. If amending	any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	
	
 	
Note: If the da	(optional) e 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)() the inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the ective date on the Department of State's records.
f the record specific ecord is filed.	es a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated	Signature of a nember or authorized representative of a member
	MARTANA BIDDY Typed or printed name of signee