# M1000002815

(Re	questor's Name)	
(Add	dress)	
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(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL MAIL
(Bu	siness Entity Nar	me)
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Certified Copies	_ Certificates	s of Status
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EXAMINER



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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Chava Energy LLC
Managing Member - Hagen Ruff
4411 Alhambra Circle, Coral Gables, FL 33146
Mobile: 619-227-3176
0817nospam@pobox.com

To:

FL Division of Corporations

Date: Nov 12, 2012

Re: Name change of Chava Solar LLC, Doc # M10000002815 to "Chava Energy LLC"

Dear Madams, Sirs,

Please find attached the amendment of Chava Solar LLC, a Nevada LLC to change the registered name in FL to "Chava Energy LLC". (The name change has already occurred in the entity home state NV).

Sincerely,

Hagen Ruff – Managing Member Chava Energy LLC (formerly Chava Solar LLC)

#### Attachments:

- NV Secretary of State Amendment for name change
- NV Secretary of State online status of entity as of Nov 12, 2012
- Signed Florida Amendment form
- Florida sunbiz.org annual filing 2012
- Check \$30.00

#### **COVER LETTER**

TO:	Registration S					a's
	Division of C	corporations			ر کی م	
					Z.C.	12 Common
SUBJ	ЕСТ:		va Solar LLC			الله الله الله
		Name of Foreigr	Limited Liabili	ty Compa	any T	
Dear S	Sir or Madam:					ا بن الله
The e	nclosed applica	tion, certificate and fee(s) a	are submitted for	filing.		CORPET OF
Please	return all corre	espondence concerning this	matter to the fo	llowing:		7
		Hagen Ruff				
		Name of Person				
		Chava Solar LLC				
		Firm/Company				
	44	11 Alhambra Circle				
		Address				
	Cor	ral Gables, FL 33146				
		City/State and Zip Code				
——————————————————————————————————————		817nospam@pobox.co be used for future annual		n)		
For fu	rther information	on concerning this matter, p	olease call:			
	Нас	jen Ruff_	at (619)		227-3176	
	Name	e of Person	Area Code &	Daytime	e Telephone Number	
	Registration S Division of C Clifton Build 2661 Executi	Corporations		Registra Division P.O. Bo	NG ADDRESS: ation Section of Corporations x 6327 ssee, Florida 32314	
	sed is a check 5 Filing Fee	for the following amount:	\$55 Filing F Certified Co		\$60 Filing Fee, Certificate of Status & Certified Copy	

## APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO APPLICATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

#### **SECTION I (1-3 must be completed)**

Name of limited liability company as it appears on the records of the Florida Department of State: Chava Solar LLC
Jurisdiction of its organization: Nevada
Date authorized to do business in Florida: June 22, 2010
SECTION II (4-7 complete only the applicable changes)
If the amendment changes the name of the limited liability company, when was the change effected under the laws of its jurisdiction of organization? 11/14/2011
New name of the limited liability company: Chava Energy LLC  (must end with "Limited Liability Company," "L.L.C.," or "LLC.")
f name unavailable, enter alternate name adopted for the purpose of transacting business in orida and attach a copy of the written consent of the managers or managing members adopting e alternate name. The alternate name must end with "Limited Liability Company," "L.L.C." "LLC.")
If the amendment changes the period of duration, indicate new period of duration:
If the amendment changes the jurisdiction of organization, indicate new jurisdiction:
If the amendment corrects any false statement, indicate the statement being corrected and the correction:
Attached is an original certificate, no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized.  Signature of a member or the approximately depresentative of a member
Hagen Ruff - Managing Member
Typed or printed name of signee

Filing Fee: \$25.00





ROSS MILLER Secretary of State 204 North Carson Street, Suite 1 Carson City, Nevada 89701-4520 (775) 684-5708 Website: www.nvsos.gov

### Amendment to Articles of Organization

(PURSUANT TO NRS 86.221)

USE BLACK INK ONLY - 00 NOT HIGHLIGHT

ABOVE SPACE IS FOR OFFICE USE ONLY

### Certificate of Amendment to Articles of Organization For a Nevada Limited-Liability Company (Pursuant to NRS 86.221)

1. Name of limited-liability company: Chava Solar LLC (E 02 655 3 2 0 10 - 8)
2. The company is managed by: Managers OR (check anly one box) Members
3. The articles have been amended as follows: (provide article numbers, if available)*
Name of company is to be changed "Chava Solar LLC" to "Chava Energy LLC" effective 11/14/2011
4. Effective date and time of filing: (optional) Date: 11/14/2011 Time: 12 am (must not be later than 90 days after the certificate is filed)
5. Signature (must be signed by at least one manager or by a managing member):
X the Mayon Ruff - Managing Momber
Signature '
Y as a second control of the control

\* 1) If amending company name, it must contain the words "Limited-Liability Company," "Limited Company," or "Limited," or the abbreviations "Ltd.," "L.L.C.," or "L.C.," "LLC" or "LC." The word "Company" may be abbreviated as "Co."

2) If adding managers, provide names and addresses.

FILING FEE: \$175.00

IMPORTANT: Failure to include any of the above information and submit with the proper fees may cause this filing to be rejected.

This form must be accompanied by appropriate fees.

Nevada Secretary of State 86.221 DLLC Amendment
Project 8.31.11





ROSS MILLER Secretary of State 202 North Carson Street Carson City, Nevada 89701-4201

(775) 684-5708 Website: www.nvsos.gov		Customer Order Instructions			
SUBMIT THIS COMPLETED FORM WITH		USE BLACK IN	K ONLY - I	DO NOT HIGHLIGHT	
Processing	Regu	lar 24-h	Hour Expedite (	additiona	l fee included)
Service Requeste	ed: ESI 113		, , , , , , , , , , , , , , , , , , ,		
Name of Entity: Chava So	lar LLC		C	)ate:	11/14/2001
	lar LLC ambra Circle bles, FL 33146				
Contact Name:	Hagen Ruff	Pho	ne: 61	9-227-3	3176
Return Delivery: (email or	fax options do not recei	ve a copy via mail; mu	st be ordered separa	itely)	
Email to: hruff@	Dehavaenergy.com		Fax to:		
☐ Hold for Pick Up ☐	Mail to Address A	bove	c Acct#		
Other: (explain below)					
Order Description: (include One change of name - fee: \$		l fee breakdown)*			
*PLEASE NOTE: this office keep stamped copy ordered at the time copy is \$2.00 per page (plus \$30.0 Method of Payment:	of filing is at no charge. 00 for each certification)	Each additional	Total Amount:		175.00
Check/Money Order	Credit Card (att	ach ePayment checklist)	Trust Acco	ount:	
☐ Use balance remaining	j in job#				