Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H21000086429 3)))



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To:

Division of Corporations

Fax Number : (850) 617-6383

Account Name : CAPITOL SERVICES, INC.

Account Number : I20160303017 Phone : (855)498-5500

Fax Number : (800)432-3622

annual report mailings. Enter only one email address please.**

Email Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN GABLES ENERGY PARTNERS I, LLC

PLEASE PROVIDE THE ORIGINAL SUBMISSION DATE OF 3/2/21

57

Certificate of Status	0
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3/3/2021 10:05:26 AM PAGE 1/001 Fax Server



March 3, 2021

FLORIDA DEPARTMENT OF STATE

Division of Corporations

GABLES ENERGY PARTNERS I, LLC 75 VALENCIA AVENUE, SUITE 600 CORAL GABLES, FL 33134US

SUBJECT: GABLES ENERGY PARTNERS I, LLC

REF: M16000005878

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The fax audit cover page is not correct.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Tracy L Lemieux Regulatory Specialist II FAX Aud. #: H21000084463 Letter Number: 821A00004529

COVER LETTER

TO:	_		Section Corporations				
SUBJE	ECT:	Gables I	Energy Partners I, LLC				
			Name of Foreig	n Limited Lie	ibility Co	mpany	
Dear S	ir or N	ladam:					
The en	closed	applica	ation, certificate and fee(s)	are submitted	l for filing	Ļ	
Please	return	all com	respondence concerning thi	s matter to th	e followin	ng:	
Mark C	asillas				_		
			Name of Person	-	_		
Casillas	s Law C	Group					
			Firm/Company				
8 Barte	l Court				_		
			Address				
Tiburor	n, CA	149 20					
_			City/State and Zip Code	3			
mark@	casillas	law.com	ı				
E-m	ail add	ress: (t	o be used for future annual	report notific	cation)		
For fur	rther ir	ıformat	ion concerning this matter,	please call:			
Mark C	Casillas			at (533-64	155	
		Nam	e of Person		de & Dayt	ime Telephone Number	
		ng Addr			Street A	ddress: ration Section	
Registration Section Division of Corporations					Division of Corporations		
P.O. Box 6327					The Centre of Tallahassee		
			, FL 32314			I. Monroe Street, Suite 810 assec, FL 32303	
	Encl	osed is	a check for the following	amount:			
□\$25			☐ \$30 Filing Fee & Certificate of Status	S55 Filin	-	☐ \$60 Filing Fee, Certificate of Status & Certified Copy	
CR2E05	5 (9/15))				Continue Copy	

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

SECTION I (1-4 must be completed)

1. Name of limited liability Company as it appears on the	e records of the Florid	ia Department of				
State: Gables Energy Partners I, LLC			_ _			
Enter new principal office address, if applicable:						
(Principal office address MUST BE A STREET ADDRESS)			<u> </u>			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			<u> </u>			
2. The Florida document number of this limited liability of	company is: M160000	005878				
3. Jurisdiction of its organization: Delaware						
Jurisdiction of its organization: 4. Date authorized to do business in Florida: July 22, 201		<u> </u>	F3			
SECTION II (5-9 complete only the applicable change	eo)					
5. New name of the limited liability company: EMG Engrangement (must conta	gineering & Managem	ent, LLC	<u>.</u> ,			
(must conta	in "Limited Liability	Company, " "L.L.C.," or "	LDC.")			
(If name unavailable, enter alternate name adopted for the copy of the written consent of the managers or managing must contain "Limited Liability Company," "L.L.C." or "	members adopting the	ng business in Florida and a ne alternate name. The altern	attach a nate name			
6. If amending the registered agent and/or registered office registered agent and/or the new registered office address	cer address on our rec here:	cords, enter the name of the	new			
Name of New Registered Agent:						
New Registered Office Address:	Factor Flo	orida Street Address				
	City	, Florida Zip Coo	le			
New Registered Agent's Signature, if changing Registers	ed Agent:					
I hereby accept the appointment as registered agent and the provisions of all statutes relative to the proper and of and accept the obligations of my position as registered a document is being filed to merely reflect a change in the liability company has been notified in writing of this chan	agree to act in this co omplete performance gent as provided for i registered office addr	of my duties, and I am fami in Chapter 605. F.S. Or. if t	iliar WIVI his			

. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), indicate that change:							
le/ Capacity	Name	Address	Type of Action				
			□Add				
		 	□Remo				
	<u> </u>		□Add				
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aforementioned a	ificate, if required: no more than 90 mendment(s), duly authenticated by the day of which this entity is organ	the official having custody of records in the	□Rcm				

Filing Fee: \$25.00

Delaware The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT
COPY OF THE CERTIFICATE OF AMENDMENT OF "GABLES ENERGY PARTNERS
I, LLC", CHANGING ITS NAME FROM "GABLES ENERGY PARTNERS I, LLC"
TO "ENCINA MANAGEMENT GROUP, LLC", FILED IN THIS OFFICE ON THE
FIFTEENTH DAY OF JANUARY, A.D. 2019, AT 3:04 O'CLOCK P.M.



Authentication: 202087045

Date: 01-16-19

State of Deliwire
Secretary of State
Division of Corputations
Delivered 05:04 PM 01/15/2019
FILED 03:04 PM 01/15/2019
SR 20190285130 - File Number 60/6418

STATE of DELAWARE LIMITED LIABILITY COMPANY CERTIFICATE of AMENDMENT

- 1. Name of Limited Liability Company: Gables Energy Partners L.L.C.
- 2. The Certificate of Formation of the limited liability company is hereby amended as follows:

The name of the limited liability company is changed to:

Encina Management Group, LLC

IN WITHESS WEIRREOF, the undersigned has executed this Certificate on the 45th day of January, 2019.

Authorized person

Name: Mark Casillas

Delaware The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF AMENDMENT OF "ENCINA MANAGEMENT GROUP, LLC", CHANGING ITS NAME FROM "ENCINA MANAGEMENT GROUP, LLC" TO "EMG ENGINEERING & MANAGEMENT, LLC", FILED IN THIS OFFICE ON THE NINETEENTH DAY OF FEBRUARY, A.D. 2021, AT 2:47 O'CLOCK P.M.



Authentication: 202558697

Date: 02-22-21

STATE of DELAWARE LIMITED LIABILITY COMPANY CERTIFICATE of AMENDMENT

- 1. Name of Limited Liability Company: Encina Management Group, LLC
- The Certificate of Formation of the limited liability company is hereby amended as follows:

The name of the limited liability company is changed to:

EMG Engineering & Management, LLC

IN WITNESS WHEREOF, the undersigned has executed this Certificate on the 19th day of February, 2021.

Authorized person

Name: Mark Casillas