## P15000032379

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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## **COVER LETTER**

| TO: Amendment Section Division of Corporations   |
|--|
| NAME OF CORPORATION: Southern Comfore Solar, Inc<br>DOCUMENT NUMBER: \$25000032379   |
| The enclosed Articles of Amendment and fee are submitted for filing.   |
| Please return all correspondence concerning this matter to the following:  |
| Anita L. Gree  |
| Southern Comfort Solar, Inc.   |
| Lake Worth FL 33460 City/ State and Zip Code   |
| E-mail address: (to be used for future annual report notification)   |
| For further information concerning this matter, please call:   |
| Anita L. Gee at (561) 425 - 5844  Name of Contact Person Area Code & Daytime Telephone Number  |
| Enclosed is a check for the following amount made payable to the Florida Department of State:  |
| \$35 Filing Fee Certificate of Status  Certificate of Status  Certified Copy (Additional copy is enclosed)  Certified Copy (Additional Copy is enclosed)  Certified Copy (Additional Copy is enclosed) |

**Mailing Address** 

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

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## Articles of Amendment

| to Articles of Incorporation  |           |                                  |
|---|-----------|----------------------------------|
| Southern Comfort Solar Inc  |           |                                  |
| (Name of Corporation as currently filed with the Florida Dept. of State)  |           |                                  |
| P1500032379 P15000032379  |           |                                  |
| (Document Number of Corporation (if known)  |           |                                  |
| Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following its Articles of Incorporation:  | 3 amendn  | nent(s) to                       |
| A. If amending name, enter the new name of the corporation:   |           |                                  |
| name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the all "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must of word "chartered," "professional association," or the abbreviation "P.A."  B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)  C. Enter new mailing address, if applicable: |           |                                  |
| (Mailing address MAY BE A POST OFFICE BOX)  D. If amending the registered agent and/or registered office address in Florida, enter the name of the  | 15 MAY 14 | FILE<br>SECRETARY<br>TALLAHASSEI |
| new registered agent and/or the new registered office address:  | 7         |                                  |
| Name of New Registered Agent  | 12:21     | STATE<br>.ORIDA                  |
| (Florida street address)  |           | <i></i>                          |
| New Registered Office Address:, Florida   | Code)     | -                                |
| New Registered Agent's Signature, if changing Registered Agent:  I here by accept the appointment as registered agent. I am familiar with and accept the obligations of the position  |           |                                  |

Signature of New Registered Agent, if changing

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V= Vice President; T= Treasurer; S= Secretary; D= Director; TR= Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

| Example: X Change             | PT John I              | <u>Doe</u>  |   |
|-------------------------------|------------------------|-------------|---|
| X Remove                      | <u>V</u> <u>Mike</u>   | Jones       |   |
| X Add                         | <u>SV</u> <u>Sally</u> | Smith       |   |
| Type of Action<br>(Check One) | <u>Title</u>           | Name        | Address   |
| 1) Change                     | Vr                     | Abron Gree  | 611 North O Stree                                   |
| Add Remove                    |                        |             | Lake Worth, Fl. 33460 (UN)                          |
| 2) Change                     | Ma                     | Jasmine Gee | 803 Winder Circle                                   |
| Add  Remove  Change           | ØW                     | James Gee   | Houston, IX 77075 (UN) 1342 Gentle Bend Houston, TX |
| Add Remove                    |                        |             | 77075 (un)  |
| 4) Change Add Remove          |                        |             | SECRETAR<br>TALLAHAS<br>15 MAY 14                   |
| 5) Change Add                 |                        |             | SEE FLORI   |
| Remove                        |                        |             | OF A  |
| 6) Change                     | **********             |             |   |
| Add                           |                        |             |   |
| Remove                        |                        |             |   |

| Attach additional sheets, if necessary).                                 | ticles, enter change(s) here: (Be specific)                |                |                |
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| f an amendment provides for an exc                                       | hange, reclassification, or cancellation of issued shares, |                |                |
| provisions for implementing the am-<br>(if not applicable, indicate N/A) | endment if not contained in the amendment itself:          |                |                |
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| The date of each amendment(s) adoption: 5/11/2015  | اده کا       | kan dham dha |
|--|--------------|--------------|
| date this document was signed.   | , 11 Ou      | her than the |
| Effective date if applicable: 5 11 2015 (no more than 90 days after amendment file date)   |              | <u></u>      |
| Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date we document's effective date on the Department of State's records.                          | ill not be l | isted as the |
| Adoption of Amendment(s) (CHECK ONE)   |              |              |
| The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.   |              |              |
| ☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s): |              |              |
| "The number of votes cast for the amendment(s) was/were sufficient for approval  |              |              |
| by"  (voting group)  |              |              |
| (voting group)   |              |              |
| ☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.  | <b>5</b>     | SECI         |
| The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.   | HAY I 4      | FIL<br>AHASS |
| Dated5/11/15   | PH 12:       | FOF S        |
| Signature Quital I. All  | <u>~</u>     | ORIE<br>ORIE |
| (By a director, president or other officer - if directors or officers have not been  |              | A            |
| selected, by an incorporator — if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)   |              |              |
| Anita L. Gee (Typed or printed name of person signing)   |              |              |
| (Typed of printed fame of person signing)  |              |              |
| Tresident (EO Owner (Title of person signing)  | ۷)           | _            |
|  |              |              |