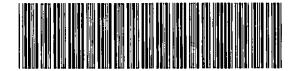
P170000 40191

(Deposited Name)			
(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer: Received Fax on 1/8/18 to Resubmit on profit amendment form, on profit amendment form, instead at Numprofit.			
55			

Office Use Only



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Knew



January 8, 2018

RAFAEL E GIRO DEMANDSIDE ENERGY SOLUTIONS INC 6815 NW 57TH WAY GAINESVILLE, FL 32653

SUBJECT: DEMANDSIDE ENERGY SOLUTIONS INC

Ref. Number: P17000040191

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

PLEASE USE THE FLORIDA PROFIT CORPORATION FORM PROVIDED ONLY.

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) 245-6050.

Susan Tallent Regulatory Specialist II

Letter Number: 118A00000411



FLORIDA DEPARTMENT OF STATE Division of Corporations

December 15, 2017

RAFAEL E GIRO
DEMANDSIDE ENERGY SOLUTIONS INC
6815 NW 57TH WAY
GAINESVILLE, FL 32653

SUBJECT: DEMANDSIDE ENERGY SOLUTIONS INC

Ref. Number: P17000040191

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The document you submitted has been prepared pursuant to nonprofit statutes (chapter 617, Florida Statutes). As the entity was originally filed as a corporation for profit, this document should be filed pursuant to chapter 607, Florida Statutes.

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6050.

Susan Tallent Regulatory Specialist II

Letter Number: 817A00025421

Replied 1/3/18

COYER LETTER

TO: Amendment Section Division of Corporations
NAME OF CORPORATION: Demands de Energy Solutions Inc
DOCUMENT NUMBER:
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Name of Contact Person
Derondside Energy Soldions Inc.
930 South Highway 19 Svite IA Palatka Fl 32177 City/ State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Barbaran LeBlonc at (386) 546-8504 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 □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status (Additional copy is enclosed) □\$52.50 Filing Fee Certificate of Status (Additional copy is enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of Corporations

P.O. Box 6327

Tallahassee, FL 32314

Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

10			
DEMANDSIDE ENERGY SOLUTIONS INC			
· · · · · · · · · · · · · · · · · · ·	filed with the Florida Dept. of State)		
P17000040191	0 101		
(Document Number of	Corporation (if known)		
Pursuant to the provisions of section 607.1006. Florida Statutes, this <i>F</i> its Articles of Incorporation:	Tlorida Profit Corporation adopts the fo	llowing amendmen	nt(s) to
A. If amending name, enter the new name of the corporation:			
		The new	
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Cword "chartered," "professional association," or the abbreviation "I	'o". A professional corporation name		
B. Enter new principal office address, if applicable:		<u> </u>	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)			
		29	=
			,ED
C. Enter new mailing address, if applicable:		- T	O
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)		<u> </u>	
D. If amending the registered agent and/or registered office address: new registered agent and/or the new registered office address:			
· · · · · · · · · · · · · · · · · · ·			
Name of New Registered Agent			
(Florida stre	at addraev)		
New Registered Office Address:	, Florida <i>Cin</i> y	(Zip Code)	
· ·		(
New Registered Agent's Signature, if changing Registered Agent:	.,		
I hereby accept the appointment as registered agent. I am familiar w	ith and accept the obligations of the pos	ition.	

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	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	P	James EBellomy Jr.	6001 E 254 Monor Rd
Add		J	Palatka FL
Remove			30177
2) Change			
Add			
Remove			
3)Change		-	
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			unsumate.
Remove			

attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
. -	
·	
	
· · · · · · · · · · · · · · · · · · ·	
an amendment provides for an excl	hange, reclassification, or cancellation of issued shares,
orovisions for implementing the ame (if not applicable, indicate N/A)	endment if not contained in the amendment itself:
(i) not applicable, marcule STA)	

.The date of each amendment(s) adoption:	05/03/2017	if other than the
date this document was signed.		
Effective date if applicable:	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block doe document's effective date on the Department	s not meet the applicable statutory filing requirements, of State's records.	this date will not be listed as the
Adoption of Amendment(s)	CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders was/were sufficient for	he shareholders. The number of votes east for the amend or approval.	lment(s)
☐ The amendment(s) was/were approved by must be separately provided for each voice.	the shareholders through voting groups. The following sing group entitled to vote separately on the amendment(s	statement G:
"The number of votes cast for the ar	nendment(s) was/were sufficient for approval	
by	voting group)	
(voting group)	
The amendment(s) was/were adopted by taction was not required.	he board of directors without shareholder action and shareholder	reholder
☐ The amendment(s) was/were adopted by t action was not required.	he incorporators without shareholder action and sharehol	der
01/16/2018		
DatedSignature	fail E. Mi	
selected, by an i	resident or other officer - if directors or officers have no neorporator - if in the hands of a receiver, trustee, or oth lary by that fiduciary)	
	FLEGIRO	
	(Typed or printed name of person signing)	
VICE P	RESIDENT	
	(Title of person signing)	