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To:

Division of Corporations

Fax Number : (850)617-6380

Prom:

Account Name : UNITED AGENT GROUP INC.

Account Number : I20160000086 : (561)508-5033 Phone : (561)694-1639 Fax Number

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:_

REGISTERED AGENT CHANGE SUNPOWER CORPORATION, SYSTEMS

Certificate of Status	0
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Page Count	02
Estimated Charge	\$35.00

FEB 1 2 2018

S. YOUNG

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this ange is submitted for a corporation organized under the laws of the State of Delaware er to change its registered office or registered agent, or both, in the State of Florida.	
1. The name of	the corporation: SUNPOWER CORPORATION, SYSTEMS	
	OND, CA 94804	
3. The mailing a	address (if different):	
4. Date of incor	rporation/qualification: 01/16/2007 Document number: F07000000254	
	d street address of the current registered agent and registered office on file with the artment of State: (If resigned, enter resigned)	
	C T CORPORATION SYSTEM	
	1200 SOUTH PINE ISLAND ROAD	
	PLANTATION, FL 33324	
6. The name and (if changed):	. PPC ** (D) *	<u> </u>
	11380 Prosperity Farms Road #221E	_
	P.O. Box NOT acceptable P.O. Box NOT acceptable P.O. Box NOT acceptable	
	Palm Beach Gardens, FL 33410	
The street address changed will	ress of its registered office and the street address of the business office of its registered agent, I be identical.	
Such change was authorized by the	as authorized by resolution duly adopted by its board of directors or by an officer so the board, or the corporation has been notified in writing of the change.	
Signah	Lauren Vadney, Atty-in-Fact Printed or typed name and title	
I hereby accept I further agree performance of agent. Or, if th	t the appointment as registered agent and agree to act in this capacity. It to comply with the provisions of all statutes relative to the proper and complete If my duties, and I am familiar with and accept the obligation of my position as registered his document is being filed merely to reflect a change in the registered office address, I that the corporation has been notified in writing of this change.	
	02/09/2018	
Sig	gnature of Registered Agent Date	
If signing on be	chalf of an entity:	
	dney, Special Secretary	
1	Typed or Printed Name	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

* * * FILING FEE: \$35.00 * * *

CR2E045 (03/12)