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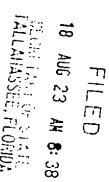
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AUG 2 9 2018 S. YOUNG





CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Ami Casper ami.casper@cscglobal.com

Date: August 21, 2018

Order#: 349708/227

Re: SOLAR GLYNN LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25 .

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Return Regular Mail in the enclosed envelope.

Attn:Ami Casper c/o Corporation Service Company 251 Little Falls Drive Wilmington, DE 19808

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

INCA.XCOA



STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Na	ame of the limited liability company: SOLAR GLYNN	ILLC	
2. (a)	3250 Ocean Park Blvd., Suite 355	(b)_	
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Santa Monica C# 90405	 	
	09/19/2014		.14000147380
3.	Date of filing/registration in Florida	4.	Document number
5. (a)	Registered Agent Solutions, Inc.		
()	Registered Agent and Registered Office shown on the records of t	he Florida De	ept. of State:
	155 Office Plaza Drive, Suite A		
	Registered Office Address (MUST BE FLORIDA STREET A	(DDRESS)	AUG 23
	Tallahassee FL	32301	- Land
(b)	Corporation Service Company		LORIUE
(0)	Enter name of NEW Registered Agent and/or NEW Registered	Office addre	
	1201 Hays Street		
	NEW Registered Office Address:		
	T. II		
	Tallahassee FL_	32301	
he chai igent w vas/we	mited liability company is not organized under the law inge or changes are made, the Florida street address of trill be identical. Or, in the case of a Florida limited liable authorized by an affirmative vote of the members of the office of organization or the operating agreement of the least of the liable of	the register bility comp the limited	ed office and the business office of the registered pany, it is hereby confirmed that the change(s) of liability company or as otherwise provided in
	Lee & Cone	Jill Cilm	ni. Authorized Person
	ire of a member or authorized representative of a member		Printed or typed name of signee
he obli o mere	y accept the appointment as registered agent and agreems of all statutes relative to the proper and complete pations of my position as registered agent as provided by reflect a change in the registered office address. The in writing of this change.	ee to act in performanc for in Cha ereby confi	this capacity. I further agree to comply with the e of my duties, and I am familiar with and accept pter 605, F.S. Or, if this document is being filed rm that the limited liability company has been
Signatur	e of Registered Agent Corporation Service Company	BY: Ami	M. Casper, Asst. Vice President