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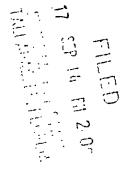
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D. SCOTT SEP 1 5 2017

COVER LETTER

TO: Registration Section

INHS18 (2/14)

Division of Corporations	
PLAZA SOLAR, LLC	
	ted Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Chang	ge and fee(s) are submitted for filing.
Please return all correspondence concerning this matter t	to the following:
CHARLES H. BALL	
Name of Person	
CHARLES H. BALL & ASSOCIATES, P.A.	
Firm/Company	
1444 FIRST STREET, STE B	
Address	
SARASOTA, FL 34236	
City/State and Zip Code	
charlesb@charleshball.com	t notification)
E-mail address: (to be used for future annual report	t notification)
For further information concerning this matter, please ca	
CHARLES H. BALL 94	1 952-1500
Name of Person	Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Enclosed is a check for the following amount:	
2 \$25 Filing Fee	□ \$55 Filing Fee & Certified Copy

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PLAZA SOLAR, LLC		
(Name of the Limited I	iability Company as it now appears on our records.) lorida Limited Liability Company)	
The Articles of Organization for this Limited Liabi	lity Company were filed on August 8, 2017	and assigned
Florida document number L17000175429	·	
This amendment is submitted to amend the following	ng:	
A. If amending name, enter the new name of the	e limited liability company here:	
The new name must be distinguishable and contain the words	"Limited Liability Company," the designation "LLC" or th	ne abbreviation "L.L.C."
Enter new principal offices address, if applicable	e:	
(Principal office address MUST BE A STREET A	DDRESS)	
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BO.	<u></u>	
		T. : : : 17 TI
	registered office address on our records, <u>en</u>	ter the name of the r
registered agent and/or the new registered office	address here:	
Name of New Registered Agent:		<u> </u>
		00
New Registered Office Address:	Enter Florida street address	
	.,,	
-	, Florida	Zin Code

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR =	Manager	•
AMBR =	Authorized	Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	Ludwig Czeisler		
			Remove
		<u></u>	■ Change
AMBR	Carmen O. Czeisler	_	
		 	Remove
			■ Change
MGR	Satnam Singh		
	·	Remove	
			E Change
	·		
			☐ Chānge
		_	DAGU
			Remove
			Change
		_	
			□ Remove
			☐ Change

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	(1-3)
ective date, if other than the date of filing:	than 90 days after filing.) Pursuant to 605,020
e: If the date inserted in this block does not meet the applicable statutory filing rememt's effective date on the Department of State's records.	quirements, this date will not be listed a
	3 8
record specifies a delayed effective date, but not an effective time he 90th day after the record is filed.	e, at 12:01 a.m. on the earlier o
ed September 5 2017	
$\bigcap \mathcal{A} \mathcal{A} \mathcal{A} \mathcal{A}$	

Page 3 of 3

Filing Fee: \$25.00