120000050923

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
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COVER LETTER

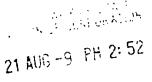
Division of Co			•
Hughes Re	oad Solar Farm, LLC		,
SUBJECT:	Name of Lim	ited Liability Company	
		tu ac m	
Please return all correspo	ondence concerning this matter	to the following:	
	Rushabh Bhakta		
		Name of Person	
	Novel Energy Solutions L.	L.C.	
		Name of Limited Liability Company It and fee(s) are submitted for filing. Seerning this matter to the following: In Bhakta Name of Person Intergy Solutions L.L.C. Firm/Company yeliff Street. Suite 300 Address Address Address Address And Solution and Zip Code Sol	
	2303 Wycliff Street, Suite		
		Address	
	St. Paul, MN 55114		
		City/State and Zip Code	
	rushabh.bhakta@novelenerg		
	E-mail address: (t	o be used for future annual report noti	fication)
For further information of	concerning this matter, please ca	ili:	
Rushabh Bhakta			
Name o	of Person	Area Code Daytim	e Telephone Number
Enclosed is a check for t	he following amount:		
□ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	Certified Copy	Certificate of Status & Certified Copy
Mailing Addres Registration ! Division of C	Section Corporations	Registration Sec Division of Cor	porations
P.O. Box 632	27	The Centre of T	allahassee

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



Hughes Road Solar Farm, LLC				
(Name of the Limit	ed Liability Compa (A Florida Limited l	ny as it now appears (Liability Company)	on our records.)	
The Articles of Organization for this Limited Li Florida document number L20000050923	ability Company	were filed on 02/12	3/2020	_ and assigned
This amendment is submitted to amend the following	owing:			
A. If amending name, enter the new name of	the limited liab	ility company here	î:	
The new name must be distinguishable and contain the w	ords "Limited Liabi	lity Company." the desi	gnation "LLC" or the abbro	eviation "L.L.C."
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		2303 Wycliff Stre	et, Suite 300	
		St. Paul, MN 5511	14	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	<u>BOX)</u>	2303 Wycliff Stree St. Paul, MN 5511		
B. If amending the registered agent and/or reagent and/or the new registered office address	• /	address on our rec	ords, <u>enter the name o</u>	of the new registered
Name of New Registered Agent:	C T Corporatio	n System		
New Registered Office Address:	1200 South Pin	e Island Road		
		Enter Florida street address		
	Plantation		, Florida 3332	4
		City		Zip 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.

Mark Pruett, Assistant Secretary

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager
AMBR = Authorized Member

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<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	Novel ME SPV LLC	2303 Wycliff Street, Suite 300	≣Add
		St. Paul, MN 55114	□Remove
			□Change
MGR	RENERGETICA USA CORPORA	2950 LAKE EMMA ROAD 1030	□ Add
		LAKE MARY, FL 32476	=Remove
			□Change
			□Add
			□Remove
			□ Change
		<u> </u>	□Add
			□Remove
			□Change
		.	□Add
			□Remove
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			□Remove
			□Change

			water a state of	
If amending any other informa	tion, enter change(s) here:	(Attach additional shee 2	Is. if necessary), 2: 52	
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Iffective date, if other than the an effective date is listed, the date mus Note: If the date inserted in this blocument's effective date on the De	t be specific and cannot be prior to ack does not meet the applicab	date of filing or more than 90 de statutory filing requirer	(optional) days after filing.) Pursuant to 605 nents, this date will not be list	5.0207 (3 led as th
record specifies a delayed effective d is filed.	e date, but not an effective time	e, at 12:01 a.m. on the ear	lier of: (b) The 90th day afte	er the
August 3rd	. 2021	_ •		
Red Of In				
Rushabh Bhakta	Signature of a member or authorit	zed representative of a memb	er — — — — — — — — — — — — — — — — — — —	
Estashigh Dharta	Typed or printed	name of signee		

Filing Fee: \$25.00