L2000069566

((Requestor's Name)	<u>-</u>
	(Address)	
`	(100,000)	
·	(Address)	
,	(Address)	
((City/State/Zip/Phone #)	
PICK-UP	WAIT N	1AIL
	(Business Entity Name)	
·	(Business Entity Name)	
((Document Number)	
Certified Copies	Certificates of Status	
Special Instructions	to Filing Officer:	
	J. HORNE	
	MAY 2 0 2022	
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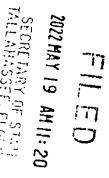
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Account#: 120000000088

Date:05/18/2022	
Name:Greg Pintacuda	
Reference #: 1689530	
Entity Name: SKYWAY AVENUE SOLAR FARM LLC	
Articles of Incorporation/Authorization to Transact Business	
Amendment	
✓ Change of Agent	
Reinstatement	
☐ Conversion	
☐ Merger	
☐ Dissolution/Withdrawal	
☐ Fictitious Name	
Other	
Authorized Amount: \$25	
Signature:	

F: 800.944.6607

P: +852.2682.9633

F: +852.2682.9790



115 N CALHOUN ST., STE. 4 TALLAHASSEE. FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

Account#: 120000000088

Date:	05/18/2022	
Name:	Greg Pintacuda	_
Reference #	1689530	_
	SKYWAY AVEN	JE SOLAR FARM LLC
Article	es of Incorporation/Authorization	to Transact Business
Amen	ndment	
✓ Change	ge of Agent	
Reins	statement	
☐ Conve	ersion	
☐ Merge	er	
☐ Disso	lution/Withdrawal	
☐ Fictitio	ous Name	
Other		
Authorized A	mount:\$25	
Signature:	Alth	

DocuSign Envelope ID: DAEF25D1-C703-48E9-98B0-FCA347CE28E2

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	venue Solar Farm Ll		20		
(Name of the Limited Liabili (A Florida	ty Company as it now appea i Limited Liability Company)	rs on our records.)	22 HA		
The Articles of Organization for this Limited Liability C	ompany were filed on	March 02, 2020	Sand assigned.		
Florida document numberL20000069566	<u>_</u> .				
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the lim	ited liability company h	ere:	<u> 2</u>		
The new name must be distinguishable and contain the words "Lim	ited Liability Company," the	designation "LLC" or the ab	breviation "L.L.C."		
Enter new principal offices address, if applicable:	718	8 W Business High	way 60		
(Principal office address MUST BE A STREET ADDR	ESS)				
		Dexter, MO 6384	41		
Enter new mailing address, if applicable:		PO Box 639			
(Mailing address MAY BE A POST OFFICE BOX)		Dexter, MO 6384	41		
B. If amending the registered agent and/or regis registered agent and/or the new registered office add		our records, <u>enter</u>	the name of the new		
Name of New Registered Agent:	Coge	Cogency Global Inc.			
New Registered Office Address:	115 North	Calhoun St. Suite	4		
	Enter Flo	rida sireet address			
	Tallahassee	, Florida	32301		
	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.

If Changing Registered Agent, Signature of New Registered Agent

DocuSign Envelope ID: DAEF25D1-C703-48E9-9BB0-FCA347CE2BE2
Distribution 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

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	REA Investments, LLC	PO Box 639	∑ Add
		Dexter, MO 63841	Remove
			Change
MGR	Renergetica USA Corporat	2950 Lake Emma Road Ste. 1030	
		Lake Mary, FL 32746	⊡ Remove
			Change
			□ Remove
			🗆 Change
			□ Add
			☐ Remove
			☐ Change
			□ Add
			□ Remove
			Change
			⊐ Add
			□ Remove
			Change

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(If an effective of Note: If the	ite, if other than the date of date is listed, the date must be specificate inserted in this block does effective date on the Department	ic and cannot be prior to date not meet the applicable s	of filing or more than 90	days after filing.) Pursuant to 6	605.026 isted a
	specifies a delayed effecti day after the record is fi		effective time, at	12:01 a.m. on the ea	rlier
Dated	March 25				
	_	.i			
_	Notalie D. 1	Cilcy of a member or authorized	representative of a mamb	PT	

Page 3 of 3

Filing Fee: \$25.00