

12/20/21, 3:51 PM

Division of Corporations

LZ1000218836

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (614)280-3338
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TALLAHASSEE, FLORIDA

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**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
GENERAL SOLAR LLC**

Certificate of Status	0
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DEC 21 2021

S. PRATHER

2021 DEC 20 PM 4:12

TALLAHASSEE, FLORIDA

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

General Solar LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

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CLERK OF STATE
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on May 11th, 2021 and assigned
Florida document number L21000218836

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Scale Property Management LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC," or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

861 N Hercules Ave, Suite 200

(Principal office address MUST BE A STREET ADDRESS)

Clearwater, FL 33765

Enter new mailing address, if applicable:

861 N. Hercules Ave, Suite 200

(Mailing address MAY BE A POST OFFICE BOX)

Clearwater, FL 33765

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

Lippes Mathias LLP

New Registered Office Address:

10151 Deerwood Park Blvd., Bldg. 300, Suite 300

Enter Florida street address

Jacksonville

Florida 32256

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

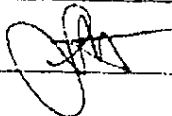
D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

N/A

E. Effective date, if other than the date of filing: upon filing (optional)
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated December 2021



Signature of a member or authorized representative of a member

John Chebat, Manager

Typed or printed name of signer

Filing Fee: \$25.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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