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(Requestor's Name)
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PICK-UP WAIT MAIL
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Y. SCOTT AUG - 5 2023

COVER LETTER

TO:

Registration Section

Div	ision of Cor	porations			
	RT Site 4, L	LLC			
SUBJECT:					
77	I Amilia a c	A mondayout and foots) are sub-	mitted for filing		
		Amendment and fee(s) are sub			
Please return	all correspo	ndence concerning this matter	to the following:		
		John Switzer			
			Name of Person		
		RT Site 4 LLC			
			Firm/Company		3
		3437 Irish Court		49758 49758	3 ≕ ~∏
			Address		
		Boulder, CO 80304			III 23 PH 2: 03
			City/State and Zip Code	S. L.	
		john@smtenergy.com			 Э
		E-mail address: (to be used for future annual report noti	fication)	
For further in	nformation c	oncerning this matter, please co	all:		
Stephanie H	agan		516 790-4006		
	Name o	f Person	at () Area Code Daytim	e Telephone Number	
Enclosed is	a check for th	ne following amount:			
		\$30.00 Filing Fee &	☐ \$55.00 Filing Fee &	☐ \$60.00 Filing Fee.	
■ \$25.00 }	ring ree	Certificate of Status	Certified Copy (additional copy is enclosed)	Certificate of Sta Certified Copy (additional copy is en	tus &
	iling Addres		Street Address:	ation.	
Registration Section Division of Corporations			Registration Se Division of Cor		
	D. Box 632	•	The Centre of T	Tallahassee	
Ta	Hahassee, l	FL 32314	2415 N. Monro	e Street, Suite 810	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

RT Site 4, LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on 6/15/2023 and assigned Florida document number L230002900 91 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: RT Site 4 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: ן נ (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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: New Registered Office Address: Enter Florida street address . Florida

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.

Cin

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

<u>Title</u>	<u>Name</u>	Address	Type of Action
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Filing Fee: \$25.00