## L24000223133

(Requestor's Name)				
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(Address)				
((	City/State/Zip/Phone #)			
PICK-UP	WAIT MA	.IL		
(E	Business Entity Name)			
	Document Number)			
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Certified Copies	Certificates of Status	_		
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Special Instructions to F	iling Officer:			
	J. HORNE			
	Nov -			
	J. HORNE NOV - 7 2024			
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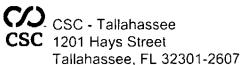
Office Use Only



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FILED 2024 NOY -6 PM 1: 04

2024 NOV -8 PM 3: 16



850-558-1500, Ext: x61563

To: Department Of State, Division Of Corporations

From: Shauna Godbolt - Shauna.Godbolt@cscglobal.com

Ext: x61563 Date: 11/06/24 Order #: 1673352-1

Re: Luminate Energy FL LLC Processing Method: Routine

## TO WHOM IT MAY CONCERN:

Enclosed please find:

Change of Registered Agent and Office

Check in the amount of: \$25.0- FL State Account Number: I20000000195

Please take the following action:

File on a routine basis
Issue proof of filing
Return evidence to the following:
ATTN: Shauna Godbolt
c/o Corporation Service Company
251 Little Falls Drive
Wilmington, DE 19808

Special Instructions:

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

## \* STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. No	ame of the limited liability company: LUMINATE EN	NERGY FL	LLC	
2. (a)		(ł	o)	
_ ( , ,	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	`	1	Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)
	8075 SW 107TH AVE APT 214		4384 E A	SHLAN AVE STE 107
	MIAMI, FL 33173		FRESNO	, CA 93726
	05/14/2024		L2400022	3733
3.	Date of filing/registration in Florida	4.		Document number
5. (a)				
J. (a)	Registered Agent and Registered Office shown on the records of WAGGONER, JAIDEN	of the Florida	a Dept. of State	PILED PH 1: 04
	Registered Office Address (MUST BE FLORIDA STREET	TADDRESS	<u> </u>	9 T
	8075 SW 107TH AVE APT 214			6 m
	MIAMI	., 33173	<del></del>	
	, F	L		
	Enter name of NEW Registered Agent and/or NEW Registered Corporation Service Company	ed Office ad	<u>ldress</u> :	-
	NEW Registered Office Address:			
	1201 Hays Street			-
	Tallahassee, F	L_32301		_
change agent v was/we	imited liability company is not organized under the last or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited large authorized by an affirmative vote of the members icles of organization or the operating agreement of the	e register liability co of the lin	ed office and ompany, it is nited liability	d the business office of the registered shereby confirmed that the change(s) y company or as otherwise provided in
	/s/ Jaiden Waggoner		Jaiden Waggoner, Authorized Person	
_	ture of a member or authorized representative of a member			Printed or typed name of signee
provisi the obl to mer	by accept the appointment as registered agent and agions of all statutes relative to the proper and completing it is a provided in the proper and completing it is a change in the registered agent as provided in writing of this change.	gree to act e perform ed for in C Thereby co	t in this cape ance of my e Chapter 605 onfirm that i	acity. I further agree to comply with the duties, and I am familiar with and accept , F.S. Or, if this document is being filed the limited liability company has been
Signatur	I mra (Kwb)  Ire of Registered Agent			
	e E. Kirby, Asst. Vice President on behalf of Corporation Service	Company		

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314

FILING FEE: \$25.00 INHS18 (2/14) COA-12411