

MIL000002532

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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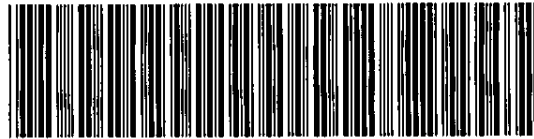
(Business Entity Name)

(Document Number)

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16 APR 26 AM 7:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Date: 04/26/2016

Account #: I20000000088

Name: ERIC HOOD

Reference #: C016061

ENTITY NAME: BLUE RAVEN SOLAR, LLC

- ☐ Articles of Incorporation/Authorization to Transact Business
- ☐ Amendment
- ☐ Annual Report
- ☒ Change of Agent
- ☐ Reinstatement
- ☐ Conversion
- ☐ Merger
- ☐ Dissolution/Withdrawal
- ☐ Fictitious Name
- ☐ Other: _____

Authorized Amount: \$ 25.00

Signature: Eric Hood

Date: 04/26/2016

Account #: I20000000088

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Reference #: C016061

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☐ Other: _____

Authorized Amount: \$25

Signature: E. Hood

**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. Name of the limited liability company: BLUE RAVEN SOLAR, LLC

2. (a) _____ (b) _____

Principal office address of limited liability company:

(Note: MUST BE STREET ADDRESS)

1220 SOUTH 630 EAST ,STE #430

AMERICAN FORK, UT 84003

Mailing address of limited liability company:

(Note: MAY BE POST OFFICE BOX)

1220 SOUTH 630 EAST ,STE #430

AMERICAN FORK, UT 84003

03/25/2016

M16000002532

3. Date of filing/registration in Florida

4. Document number

5. (a) NATIONAL CORPORATE RESEARH, LTD.

Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

115 NORTH CALHOUN STREET, STE #4

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

TALLAHASSEE, FL 32301

(b) National Corporate Research, Ltd., Inc.

Enter name of NEW Registered Agent and/or NEW Registered Office address:

115 North Calhoun Street, Suite 4

NEW Registered Office Address:

Tallahassee, FL 32301

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

[Signature]
Signature of a member or authorized representative of a member

Brady G. Stuart
Printed or typed name of signee

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.

[Signature]
Signature of Registered Agent

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314
FILING FEE: \$25.00

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16 APR 26 AM 7:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA