M110000001154

(Re	questor's Name)	
(Ad	dress)	
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•	,	
(C)+	y/State/Zip/Phone	
(Cit	y/State/Zip/Filone	: #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	Certificates	of Status
Certifica copies	_	
Special Instructions to	Filing Officer:	

Office Use Only



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2021 GST - 6 AM 9: 28

RECEIVED 2021 OCT -5 AMIL: 55

Manic Ch8

OCT OF 2021 I ALBRITTON CORPORATION SERVICE COMPANY 1201 Hays Street

17.44

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 033826 8126111

2. .

AUTHORIZATION

COST LIMIT : (\$' 25.00

ORDER DATE: September 24, 2021

ORDER TIME : 9:01 AM

ORDER NO. : 033826-035

CUSTOMER NO: 8126111

FOREIGN FILINGS

NAME: REDAPTIVE SERVICES, LLC

____ CORPORATE

LIMITED PARTNERSHIP

XX LIMITED LIABILITY COMPANY

XXXX AMENDMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_____ CERTIFIED COPY

XX PLAIN STAMPED COPY

_____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Eyliena Baker -- EXT#

EXAMINER:

COVER LETTER

TO:	Registration Division of 0	Section Corporations			
SUBJ	· ·	tive Sustainability Services, L	.LC		
SODA	EC1:	Name of Foreign	Limited Liab	oility Cor	mpany
Dear S	Sir or Madam:				
The er	nclosed applic	ation, certificate and fee(s) a	are submitted	for filing	·.
Please	return all cor	respondence concerning this	matter to the	followin	ığ:
Christ	opher Brophy				
		Name of Person		_	
Redap	otive Sustainat	pility Services, LLC			
		Firm/Company		_	
340 B	rannan Street,	Suite 400			
		Address		_	
San F	rancisco, CA 9	34107			
	-	City/State and Zip Code		 -	
legal@	Dredaptiveinc.	com			
E-n	nail address: (to be used for future annual	report notifica	ation)	
For fu	rther informat	tion concerning this matter.	please call:		
Christ	opher Brophy		415 at (413-0-)	445
	Nan	ne of Person	Area Code	e & Dayt	ime Telephone Number
	Mailing Adda Registration Division of P.O. Box 6. Tallahassee	n Section Corporations 327		Divisio The Ce 2415 N	ation Section on of Corporations ontre of Tallahassee J. Monroe Street, Suite 810 assee, FL 32303
	Enclosed is Filing Fee	a check for the following a ☐ \$30 Filing Fee & Certificate of Status	amount: S55 Filing Certified (□ \$60 Filing Fee, Certificate of Status & Certified Copy

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

SECTION I (1-4 must be completed)

1. Name of limited liability Company as it appear	rs on the records of the Florida De	partment of		
Redaptive Services, LLC State:	<u></u>	1921		
Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable:	340 Brannan Street			
	Suite 400	, 5		
	San Francisco, CA 94107			
	340 Brannan Street			
(Mailing address MAY BE A POST OFFICE BOX)	Suite 400			
MAT BE A POST OFFICE BOX	San Francisco, CA 94107	···		
2. The Florida document number of this limited li	ability company is: M170000077	54		
Delaware				
Jurisdiction of its organization: O9/ Date authorized to do business in Florida:	13/2017			
SECTION II (5-9 complete only the applicable	changes)			
5. New name of the limited liability company:	Redaptive Sustainability Services	s, LLC		
5. New name of the limited liability company: (must	st contain "Limited Liability Com	pany, ""L.L.C.," or "LLC.")		
(If name unavailable, enter alternate name adopte copy of the written consent of the managers or mamust contain "Limited Liability Company," "L.L.	anaging members adopting the alto	isiness in Florida and attach a ernate name. The alternate name		
6. If amending the registered agent and/or register registered agent and/or the new registered office a	red officer address on our records. address here:	enter the name of the new		
Name of New Registered Agent:	·			
New Registered Office Address:				
	Enter Florida	Street Address		
_	City	, Florida Zip Code		
New Registered Agent's Signature, if changing R I hereby accept the appointment as registered age the provisions of all statutes relative to the proper and accept the obligations of my position as regist document is being filed to merely reflect a change liability company has been notified in writing of t	ent and agree to act in this capaci r and complete performance of my stered agent as provided for in Ch e in the registered office address,	duties, and Lam familiar with apter 605, F.S. Or, if this		

If Changing Registered Agent, Signature of New Registered Agent

8. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), indicate that change:						
Title/ Capacity	Name	Address	Type of Acti			
			□Add			
			□Ren			
			□Ad			
			□Rer			
			□Ad			
			□Rei			
	——————————————————————————————————————		□Ad			
			□Rer			
			\Ad			
aforementioned ar	ificate, if required: no more than 90 da mendment(s), duly authenticated by th the law of valichthis entity is organiz	e official having custody of records in th	□Rei			
	Matt Gembriu A63/F32T4DCF472 Signature of the					

Filing Fee: \$25.00

Page 1

Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THAT THE SAID "REDAPTIVE SERVICES, LLC", FILED A CERTIFICATE OF AMENDMENT, CHANGING ITS NAME TO "REDAPTIVE SUSTAINABILITY SERVICES, LLC" ON THE TWENTY-EIGHTH DAY OF APRIL, A.D. 2021, AT 10:21 O'CLOCK P.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID LIMITED
LIABILITY COMPANY IS DULY FORMED UNDER THE LAWS OF THE STATE OF
DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE NOT
HAVING BEEN CANCELLED OR REVOKED SO FAR AS THE RECORDS OF THIS
OFFICE SHOW AND IS DULY AUTHORIZED TO TRANSACT BUSINESS.



Authentication: 204255100

Date: 09-27-21