M19000000694

(Re	equestor's Name)			
(Address)				
(Address)				
(Cit	ty/State/Zip/Phone	#)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				

Office Use Only



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05/20/19--01048--011 **25.00





CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

TO: FLORIDA REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Elizabeth Dawson elizabeth.dawson@cscglobal.com

Date: May 16, 2019

Order#: 741837-185

Re: SUNRUN ULYSSES OWNER 2018, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25.

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

Please return evidence to the following:

Attn: Elizabeth Dawson c/o Corporation Service Company 251 Little Falls Drive Wilmington, DE 19808

Return envelope is also enclosed for your convenience.

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

QUCA.XCOA

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.

2. (a) 595 Market S	troot 20th Floor		
. ,	reet, 29th Floor	(b)	595 Market Street, 29th Floor
•	office address of limited liability company:		Mailing address of limited liability company:
(<u>N</u>	ote: MUST BE STREET ADDRESS)		(<u>Note: MAY BE POST OFFICE BOX</u>)
San Fran	cisco, CA 94105	 -	San Francisco, CA 94105
-		 .	
01/18/201	9		M19000000694
3. Date	of filing/registration in Florida	4,	Document number
5. (a) CT Corpor	ation System		
Registered Agen	and Registered Office shown on the records	s of the Florida I	Dept, of State:
1200 South	Pine Island Road		
Registered Offic	e Address (MUST BE FLORIDA STREA	ET ADDRESS)	
			_
		·	28 MAY 20
Plantation		FL_33324	
			THE STATE OF THE S
' /	Service Company		
Enter name of N	EW Registered Agent und/or NEW Registe	ered Office addr	The state of the s
1201 Havs S			
<u>NEW</u> Registere	d Office Address:		
Tallahassee		FL_32301	
the change or change agent will be identica was/were authorized	s are made, the Florida street address 1. Or, in the case of a Florida limited	s of the registe d liability con rs of the limit	state of Florida, it is hereby confirmed that after ered office and the business office of the registered apany, it is hereby confirmed that the change(s) ed liability company or as otherwise provided in ability company.
	() - 35/-3	Jill Ci	lmi, Authorized Person
Signature of a member	or authorized representative of a member		Printed or typed name of signee
provisions of all stati the obligations of my to merely reflect a ch	ites relative to the proper and compl position as registered agent as prov ange Mhe registered office address	agree to act i lete performan ided for in Ch i. I hereby con	n this capacity. I further agree to comply with the ace of my duties, and I am familiar with and accept apter 605, F.S. Or, if this document is heing filed afirm that the limited liability company has been
notified in yriting of	inis change. Ix		
Signature of Registered A	gent Corporation Service Compan	o Bv-Fliz	abeth A. Dawson, Asst. Vice President