

M20000007090

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Q. SILAS

JUN 14 2022

Office Use Only



300381745353

RECEIVED
2022 JUN 13 AM 11:43
TALLAHASSEE, FL 09100
FILED
2022 JUN 13 PM 6:10
SECRETARY OF STATE
TALLAHASSEE, FL

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 737962 8212581

AUTHORIZATION :

COST LIMIT : \$ 25.00



ORDER DATE : June 10, 2022

ORDER TIME : 8:36 AM

ORDER NO. : 737962-010

CUSTOMER NO: 8212581

CHANGE OF AGENT

NAME: PINECREST SOLAR FARM, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Eyliena Baker

EXAMINER'S INITIALS: _____

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Pinecrest Solar Farm, LLC

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Anna Henry

Name of Person

Ecoplexus Inc.

Firm/Company

PO Box 13092

Address

Durham, NC 27709

City/State and Zip Code

legalnotices@ecoplexus.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Anna Henry

Name of Person

at (434)

962-1279

Area Code & Daytime Telephone Number

Mailing Address:

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

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Enclosed is a check for the following amount:

\$25 Filing Fee

\$55 Filing Fee & Certified Copy

**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: Pinecrest Solar Farm, LLC

2. (a) 101 2nd St, Ste 1250 (b) 101 2nd St, Ste 1250

Principal office address of limited liability company:

Mailing address of limited liability company:

(Note: **MUST BE STREET ADDRESS**)

(Note: **MAY BE POST OFFICE BOX**)

San Francisco, CA 94105

San Francisco, CA 94105

8/14/2020

M20000007090

3. Date of filing/registration in Florida

4. Document number

5. (a) CT Corporation System

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

1200 S Pine Island Road

Registered Office Address (**MUST BE FLORIDA STREET ADDRESS**)

Plantation, FL 33324

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

Corporation Service Company

NEW Registered Office Address:

1201 Hays Street

Tallahassee, FL 32301

FILED
JUN 13 PM 6:10
SECRETARY OF STATE
TALLAHASSEE, FL

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.

John Gorman
John Gorman (Feb 22, 2022 2:18 PM ET)

Signature of a member or authorized representative of a member

John Gorman

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.

Elyse Baker
Signature of Registered Agent

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