(((H230001006103)))

(shown below) on the top and bottom of all pages of the document.



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CAPITOL SERVICES, INC.

Account Number : I20160000017 Phone : (855)498-5500 Fax Number : (800)432-3622

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN BORREGO ENERGY HOLDINGS, LLC

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MAR 1 6 2023

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 appears on the re	cords of the Florida	Department of	
State: BORREGO ENERGY HOLDINGS, LLC			
Enter new principal office address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			
2. The Florida document number of this limited liability con	npany is:	5783	
3. Jurisdiction of its organization: Delaware			
4. Date authorized to do business in Florida: 05/02/2022			
SECTION II (5-9 complete only the applicable changes)		(a)	2
5. New name of the limited liability company: (must contain '	Limited Liability Co	ompany, " "L.L.C.," or "LLC.")	15 KI 10
(If name unavailable, enter alternate name adopted for the processing of the written consent of the managers or managing memust contain "Limited Liability Company," "L.L.C." or "LI.	mbers adopting the	business in Florida and attach a alternate name. The alternate name	15 mm 4:
6. If amending the registered agent and/or registered officer registered agent and/or the new registered office address her		ds, enter the name of the new	: 09
Name of New Registered Agent:			
New Registered Office Address:	Enter Flori	da Street Address	
	Lines 1 tos		
	City	, Florida Zip Code	
New Registered Agent's Signature, if changing Registered A I hereby accept the appointment as registered agent and agrithe provisions of all statutes relative to the proper and compand accept the obligations of my position as registered agen document is being filed to merely reflect a change in the regliability company has been notified in writing of this change	ee to act in this capa lete performance of t as provided for in (istered office addres.	city. I further agree to comply w my duties, and I am familiar with Chapter 605, F.S. Or, if this	ż

If Changing Registered Agent, Signature of New Registered Agent

H23000100610

8. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(c), indicate that change:					
Fitle/ Capacity	Name	Address	Type of Action		
Member	2022 Solar Development, Inc.	55 Technology Drive, Suite 102	□∧dd		
		Lowell, Massachusetts 01851	≅Remove		
Authorized Person	Andrew Hall	55 Technology Drive, Suite 101	= Add		
	Lowell, Massachusetts 01851	□Remove			
			⊡Add		
			□Remove		
		****	□Add		
			□Remove		
			□Λdd		
aforemention	under the law of which this entity is or Andrew Hall	by the official having custody of records in the	Remove		

Filing Fee: \$25.00