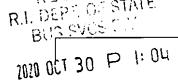
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R.I. DEPT. OF STATE

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Check the box to indicate no change L

Amendment to Application for Registration

FOREIGN Limited Liability Company

The entity's name, if different,

Date certain for dissolution

→ Filing Fee: \$50.00

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Pursuant to the provisions of RIGL 7-16-52 the undersigned foreign limited liability company hereby amends its Application for a Certificate of Registration to transact business in the state of Rhode Island, and for that purpose submits the following statement: 1. Entity ID Number 2. The name of the limited liability company is: 001714025 WAMONAPOAG TRAIL SOLAR PROJECT 2020, LLC If the entity's name is changing, Wampanoag Trail Solar Project 2020, LLC state the new name:

under which it proposed to register and	
transact business in Rhode Island is:	
4. If the period of duration has changed in the home state	complete the following section: CHECK ONE BOX ONLY

4	ŧ. IT U	ne perioa o	r quration n	as changed in th	e nome state,	complete the	iollowing section	CHECK ONE	BOX OIL
	∏ F	Perpetual (d	on-going)		-	_			

	Check the box to indicate no change x
5. If the required address of the office to be maintained in the state or cour	ntry of its organization has changed, complete
the following section.	

Check the box to indicate no change X

6. If the mailing address is changing complete the following section:

Check the box to indicate no change X 7. If the entity's purpose is changing complete the following section: *The new purpose should include ALL activity to be

transacted in the State of Rhode Island.

Check the box to indicate no change Check the box to indicate an attachment

MAIL TO:

Division of Business Services

148 W. River Street. Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov

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BY CATFN3E

FORM 451 - Revised: 08/2020

8. If the management structure ha	8. If the management structure has changed, complete the following section:				
The Limited Liability Company is to	be managed by: CHECK ONLY ONE BOX				
🔀 Its member(s) (If you have ch	ecked this box, skip to Section 9. DO NOT fill out the chart	on the next page.)			
	One (1) or more manager(s) (If the limited liability company has manager(s) at the time of the filing of this Amendment to the Application for Registration, state the name and address of each manager.)				
MANAGER	ADDRESS				
Check the box to indicate no change ×					
9. As required by RIGL <u>7-16-67</u> , th	ne limited liability company has paid all fees and taxes.				
	original Application for Registration continues in full force a rity, by reference into this Amendment to the Application for				
11. Date when this Amendment to the Application for Registration will be effective: CHECK ONE BOX ONLY					
➤ Date received (Upon filing)					
Later effective date (Date must be no more than 90 days from the date of filing)					
Under penalty of perjury, I declare and affirm that I have examined this Amendment to the Application for Registration, including any accompanying attachments, and that all statements contained herein are true and correct.					
Type or Print Name of Limited Liability	Company	Date			
WAMONAPOAG TRAIL SOLAR PROJECT 2020, LLC 10/29/2020					
Signature of Authorized Person					
Marsha Treacy					

RI SOS Filing Number: 202070082120 Date: 10/30/2020 1:04:00 PM



I, NELLIE M. GORBEA, Secretary of State of the State of Rhode Island, hereby certify that this document, duly executed in accordance with the provisions of Title 7 of the General Laws of Rhode Island, as amended, has been filed in this office on this day:

October 30, 2020 01:04 PM

Nellie M. Gorbea Secretary of State

Tulli U. Horler

