

M17000011003

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(Address)

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(Business Entity Name)

(Document Number)

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~~W17-97939~~

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COMMISSIONER OF STATE  
TALLAHASSEE, FLORIDA

DEC 29 2017

Y SULKER



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

December 11, 2017

SUNITA BURMA  
6975 WASHINGTON AVE, S  
EDINA, MN 55439

SUBJECT: TRISTAR POWER SYSTEMS LLC  
Ref. Number: W17000097939

We have received your document for TRISTAR POWER SYSTEMS LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Yasemin Y Sulker  
Regulatory Specialist II

Letter Number: 817A00025007

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Tristar Power Systems LLC  
Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Sunita Burma  
Name of Person  
Tristar Power Systems LLC  
Firm/Company  
6975 Washington Ave S,  
Address  
Edina, MN 55439  
City/State and Zip Code  
shaw service@tristarups.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Amee Shah at ( 952 ) 233 2019  
Name of Contact Person Area Code Daytime Telephone Number

**MAILING ADDRESS:**  
Division of Corporations  
Registration Section  
P.O. Box 6327  
Tallahassee, FL 32314

**STREET ADDRESS:**  
Division of Corporations  
Registration Section  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

Enclosed is a check for the following amount:

- \$125.00 Filing Fee     \$130.00 Filing Fee & Certificate of Status     \$155.00 Filing Fee & Certified Copy     \$160.00 Filing Fee, Certificate of Status & Certified Copy

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA**

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. Tristar Power Systems L.L.C  
(Name of Foreign Limited Liability Company, must include "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C.," or "LLC.")

2. MN 3. 26-3094980  
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. 01/01/2018  
(Date first transacted business in Florida, if prior to registration.)  
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. N/A 6. N/A  
(Street Address of Principal Office) (Mailing Address)

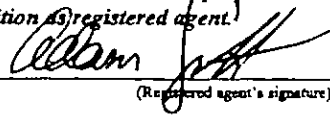
6975 Washington Ave, S  
Edina, MN 55439

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Registered Agent Solutions, Inc  
 Office Address: ISS Office Plaza Dr. Suite A  
Tallahassee, Florida 32301  
(City) (Zip code)

**Registered agent's acceptance:**

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this application, 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.

  
(Registered agent's signature)

Adam Saldana, Asst. Secretary

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
<u>President &amp; CEO</u>	<u>Amir Shah</u> <u>6975 Washington Ave S</u> <u>Edina, MN 55439</u>		
<u>Accountant</u>	<u>Sunita Burma</u> <u>6975 Washington Ave S</u> <u>Edina, MN 55439</u>		

(Use attachments if necessary)

9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

10. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

  
Signature of an authorized person

Sunita Burma

Typed or printed name of signee

2017 DEC 26 PM 2:50  
 FILED  
 17 DEC 28 PM 2:49  
 DEPARTMENT OF STATE  
 TALLAHASSEE, FLORIDA

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Office of the Minnesota Secretary of State  
Certificate of Good Standing

I, Steve Simon, Secretary of State of Minnesota, do certify that: The business entity listed below was filed pursuant to the Minnesota Chapter listed below with the Office of the Secretary of State on the date listed below and that this business entity is registered to do business and is in good standing at the time this certificate is issued.

Name: TriStar Power Systems LLC  
Date Filed: 11/06/2008  
File Number: 3076229-2  
Minnesota Statutes, Chapter: 322B  
Home Jurisdiction: Minnesota

This certificate has been issued on: 12/06/2017



*Steve Simon*

Steve Simon  
Secretary of State  
State of Minnesota