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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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**CORPORATE
ACCESS,
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Foreign

1.

NUSCALE POWER, LLC

(CORPORATE NAME AND DOCUMENT #)

2.

(CORPORATE NAME AND DOCUMENT #)

3.

(CORPORATE NAME AND DOCUMENT #)

4.

(CORPORATE NAME AND DOCUMENT #)

5.

(CORPORATE NAME AND DOCUMENT #)

6.

(CORPORATE NAME AND DOCUMENT #)

**SPECIAL
INSTRUCTIONS:**

**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. NUSCALE POWER, LLC

(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. Oregon

(Jurisdiction under the law of which foreign limited liability company is organized)

3. 37-1651151

(FBI number, if applicable)

4. Upon Filing

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

5. 6650 SW Redwood Lane, Ste. 210

(Street Address of Principal Office)

Portland, Oregon 97224

6. 6650 SW Redwood Lane, Ste. 210

(Mailing Address)

Portland, Oregon 97224

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

Name: Registered Agent Solutions, Inc.

Office Address: 155 Office Plaza Dr., Suite A

Tallahassee

(City)

Florida 32301

(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.

Adam Saldana, Asst. Secretary

(Registered agent's signature)

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

Title or Capacity:

Name and Address:

Title or Capacity:

Name and Address:

Manager

Dale Atkinson

6650 SW Redwood Lane
Ste. 210, Portland, OR 97224

Manager

John Hopkins

6650 SW Redwood Lane
Ste. 210, Portland, OR 97224

Manager

John J. Surina

6650 SW Redwood Lane
Ste. 210, Portland, OR 97224

(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 authorized person

J J SURINA JR

Typed or printed name of signee

State of Oregon

*OFFICE OF THE SECRETARY OF STATE
Corporation Division*

Certificate of Existence 294Y516E1

I, DENNIS RICHARDSON, SECRETARY OF STATE, and Custodian of the Seal of said State, do hereby certify:

NUSCALE POWER, LLC

is

Organized

under the laws of The State of Oregon

and is active on the records of the Corporation Division as of the date of this certificate

*In Testimony Whereof, I have hereunto set
my hand and affixed hereto the Seal of the
State of Oregon.*



A handwritten signature in cursive script, reading "Dennis Richardson".

DENNIS RICHARDSON, SECRETARY OF STATE

5/2/2018