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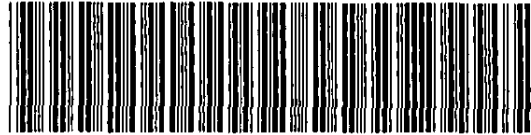
(Business Entity Name)

(Document Number)

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PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE: 8/7/14

NAME: SKNSM SOLAR POWER, INC.

TYPE OF FILING: ARTICLES

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ACCOUNT: FCA000000015

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COVER LETTER

Department of State
New Filing Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

SUBJECT: SKNSM Solar Power, Inc.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input checked="" type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED	

FROM: James P. Redding, Esq.

Name (Printed or typed)

Greenberg Traurig, One International Place

Address

Boston, MA 02110

City, State & Zip

617-310-6000

Daytime Telephone number

reddingj@gtlaw.com

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

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME
The name of the corporation shall be: SKNSM Solar Power, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal ~~street~~ address
c/o David Layman, Greenberg Truarig, LLP
777 South Flagler Drive
West Palm Beach, FL 33401

Mailing address, if different from principal address

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To construct and install solar electricity array projects and other
lawful purposes.

ARTICLE IV SHARES
The number of shares of stock is: 1,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:	<u>Bogdan Nowak</u>	Name and Title:	_____
Address	<u>President, Secretary and Treasurer</u>	Address:	_____
	<u>701 S. Olive Ave., #1712</u>		_____
	<u>West Palm Beach, FL 33401</u>		_____

Name and Title:	_____	Name and Title:	_____
Address	_____	Address:	_____
	_____		_____
	_____		_____

Name and Title:	_____	Name and Title:	_____
Address	_____	Address:	_____
	_____		_____
	_____		_____

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(cont.)

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: National Registered Agents, Inc.

Address: 1200 South Pine Island Road

Plantation, FL 33324

ARTICLE VII INCORPORATOR

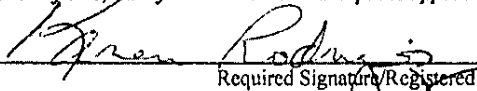
The name and address of the Incorporator is:

Name: James P. Redding, Esq.

Address: Greenberg Traurig, LLP, One International Place

Boston, MA 02110

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity


Required Signature/Registered Agent

8-7-14
Date

I submit this document and affirm that the facts stated herein are true. I am aware that the 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.


Required Signature/Incorporator

7 Aug 14
Date