

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000075815

Entity Name: ACCELERATE SOLAR LLC**Current Principal Place of Business:**10345 NATIONS FORD RD.
SUITE W
CHARLOTTE, NC 28273**Current Mailing Address:**10345 NATIONS FORD RD.
SUITE W
CHARLOTTE, NC 28273 US**FEI Number:** 45-4419756**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**DEBIASIO, JANET
2051 ILLINOIS AVE NE
ST. PETERSBURG, FLORIDA, FL 33703 US*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.***SIGNATURE:**_____
Electronic Signature of Registered Agent_____
Date**Authorized Person(s) Detail :**

Title	CEO
Name	VEILLE, XAVIER
Address	3315 EASTWOOD DR.
City-State-Zip:	CHARLOTTTE NC 28205
Title	VP
Name	WYLIE, PATRICK
Address	1001 CHURCHILL DOWNS CT, UNIT I
City-State-Zip:	CHARLOTTE NC 28211
Title	PM
Name	SPRINGS, LENANDO
Address	6237 FREEDOM DR.
City-State-Zip:	CHARLOTTE NC 28214

Title	COO
Name	VERNER, CHRIS
Address	13110 STEELECROFT PARKWAY, APT 101
City-State-Zip:	CHARLOTTE NC 28278
Title	CFO
Name	KING, MATTHEW
Address	735 PARKAIRE LN, APT 622
City-State-Zip:	CHARLOTTE NC 28217
Title	CTO
Name	VERNER, DAVID
Address	51 COBBLE HILL RD
City-State-Zip:	LAKE PLACID NC 12946

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: XAVIER VEILLE

CEO

06/15/2020

Electronic Signature of Signing Authorized Person(s) Detail_____
Date