

**B190000000179**

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To:

Division of Corporations  
Fax Number : (850)617-6383

From:

Account Name : HARVARD BUSINESS SERVICES, INC.  
Account Number : I20080000045  
Phone : (302)645-7400  
Fax Number : (302)645-1280

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: operations@energyimpactpartners.com

**FLORIDA/FOREIGN LP/LLLP**

**Energy Impact Partners LP**

Certificate of Status	1
Certified Copy	0
Page Count	04
Estimated Charge	\$1,008.75

Electronic Filing Menu

Corporate Filing Menu

Help

K. SALLY  
JUN 26 2019

19 JUN 25 PM 13:56

FILED  
19 JUN 25 AM 6:00  
TALLAHASSEE, FLORIDA  
STATE



June 20, 2019

FLORIDA DEPARTMENT OF STATE

Division of Corporations

HARVARD BUSINESS SERVICES, INC.

SUBJECT: ENERGY IMPACT PARTNERS LP  
REF: W19000058317

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refile the complete document, including the electronic filing cover sheet.

Every corporation, limited partnership, general partnership, limited liability company or trust listed as a general partner of a limited partnership, general partnership, or registered limited liability limited partnership must have an active registration/filing on file with this office before this filing can be completed. We are enclosing the appropriate instructions and/or forms for your convenience.

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.

Karen A Saly  
Regulatory Specialist II

FAX Aud. #: H19000192043  
Letter Number: 419A00012442

(((H19000192043 3)))

**APPLICATION BY FOREIGN LIMITED PARTNERSHIP OR  
LIMITED LIABILITY LIMITED PARTNERSHIP  
TO TRANSACT BUSINESS IN FLORIDA**

FILED  
19 JULY 25 AM 6  
STATE OF FLORIDA  
TALLAHASSEE, FLOR

1 Energy Impact Partners LP

(Name of Limited Partnership or Limited Liability Limited Partnership, which must include suffix)  
Acceptable Limited Partnership suffixes: Limited Partnership, Limited, L.P., LP, or Ltd.  
Acceptable Limited Liability Limited Partnership suffixes: Limited Liability Limited Partnership, L.L.P., or LLLP

If name unavailable, name under which the limited partnership or limited liability limited partnership proposes to register to transact business in Florida, must contain acceptable suffix.

2 Delaware

3 09/18/2015

State or Country of Formation

Date of Formation

4. Federal Employer Identification Number 47-5094287

5. Name of Registered Agent for Service of Process and Florida Street Address:

Harry Giovanni

249 Royal Palm Way, Suite 303

Palm Beach, FL 33480

6. 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.

  
Signature of Registered Agent

7. Principal Office:

8. Mailing Address:

c/o Energy Impact Partners

c/o Energy Impact Partners

622 3rd Avenue 37th Floor

622 3rd Avenue 37th Floor

New York, NY 10017

New York, NY 10017

9. If limited partnership is a limited liability limited partnership, check box ☐

10. Name, principal office address, and mailing address of each general partner:

Name of General Partner: Energy Impact Partners GP LLC

Name of General Partner: \_\_\_\_\_

Street Address: 622 3rd Avenue 37th Floor

Street Address: \_\_\_\_\_

New York, NY 10017

Mailing Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Name of General Partner: \_\_\_\_\_

Name of General Partner: \_\_\_\_\_

Street Address: \_\_\_\_\_

Street Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

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FILED

19 JUN 25 AM 6

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

(((H19000192043 3)))

Name of General Partner: \_\_\_\_\_ Name of General Partner: \_\_\_\_\_

Street Address \_\_\_\_\_ Street Address \_\_\_\_\_

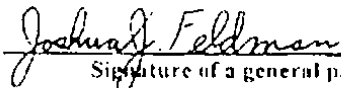
Mailing Address: \_\_\_\_\_ Mailing Address: \_\_\_\_\_

11. Effective date, if other than the date of filing: \_\_\_\_\_

(Effective date cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

12. Attached is a certificate of existence duly authenticated, not more than 90 days prior to the delivery of this application to the Florida Department of State, by the Secretary of State or other official having custody of the entity's records in the jurisdiction under the law of which it is organized.

Signed this 18<sup>th</sup> day of June, 2019

Signature of a general partner

The individual signing this document affirms that the facts stated herein are true and the individual is aware that 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.

Filing Fees:	\$1,000.00 (\$965 Filing Fee and \$35 Registered Agent Fee)
Certified Copy (optional):	\$52.50
Certificate of Status (optional):	\$8.75

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# Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ENERGY IMPACT PARTNERS LP" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE EIGHTEENTH DAY OF JUNE, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ENERGY IMPACT PARTNERS LP" WAS FORMED ON THE EIGHTEENTH DAY OF SEPTEMBER, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

FILED  
19 JUN 25 AM 6:00  
ST. LOUIS, MISSOURI  
TALLAHASSEE, FLORIDA



5827717 8300

SR# 20195494539

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)A handwritten signature of Jeffrey W. Bullock in black ink, written over a horizontal line.  
Jeffrey W. Bullock, Secretary of State

Authentication: 203044677

Date: 06-18-19

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