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2016 SEP 16 PH 3: 35

K.SALY EXAMINER SEP 20

COVER LETTER

TO:	Registration Section Division of Corporations					
SHRI	Summit Util	ity Advisors, Inc.				
SODO	ECI.	Name of corpora	tion - m	ıst include suffix		
Dear S	Sir or Madam:					
"Certi	ficate of Existence,'	by Foreign Corporation for "Certificate of Good storporation to transact but	Standing	" and check are sub		
Please	return all correspor	dence concerning this ma	atter to t	ne following:		
Sheree	L. Brown					
	,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Name	of Pers	on	· · ·	
Summ	it Utility Advisors, Ind	.				
		Firm/C	Company	7	······································	
180 M	asters Drive					
	<u></u>	A	ddress			
Brevar	rd, NC 28712					
		City/Sta	te and Z	ip code		
sheree	@summitua.com					
		E-mail address: (to be us	sed for fi	ture annual report	notification)	
For fu	rther information co	ncerning this matter, plea	ise call:			
Sheree L. Brown		828	8	862-5876		
	Name of Person	at (at () _ Code	Daytime Telep	hone Number	
			•			
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building				MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327		
	2661 Executive Center Circle Tallahassee, FL 32301			Tallahassee, FL 32314		
Enclos	sed is a check for the	following amount:				
5 70	0.00 Filing Fee (\$78.75 Filing Fee & Certificate of Status		3.75 Filing Fee & rtified Copy	□ \$87.50 Filing Fee, Certificate of Status & Certified Copy	

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA. Summit Utility Advisors, Inc. (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.") (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida) 47-2065899 (State or country under the law of which it is incorporated) (FEI number, if applicable) (Date of duration, if other than perpetual) (Date of incorporation) 9/1/2016 (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 180 Masters Drive, Brevard, NC 28712 (Principal office address) (Current mailing address, if different) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Randall E. Halley Name: 1613 Bimini Dr. Office Address: Orlando (City) 9. Registered agent's acceptance: Having been named as registered agent and to accept service of process for the above stated corporation 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.

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

Registered agent's signature)

11. Names and business addresses of officers and/or directors:	FILE				
A. DIRECTORS	2016 SEC				
Chairman: Sheree L. Brown	* UF D				
Address: 180 Masters Drive	TALLAHA COLOF CO.				
Brevard, NC 28712	TALLAHASSEL FLORIDA				
Vice Chairman:					
Address:					
Director:					
Address:					
Director:					
Address:					
B. OFFICERS					
Sheree L. Brown President:					
180 Masters Drive Address:					
Brevard, NC 28712	19.4.C. 10				
Vice President:Randall E. Halley					
1613 Bimini Dr. Address:					
Orlando, FL 32806					
Toby R. Brown Vice President:					
2861 Asheville Highway, Pisgah Forest, NC 28768					
Treasurer:					
Address:					
NOTE: If necessary, you may attach an addendum to the application listing ad	ditional officers and/or directors.				
12. Signature of Director or Officer					
Signature of Director or Officer The officer or director signing this document (and who is listed in number 11 al	nove) affirms that the facts stated herein				
are true and that he or she 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. Randall E. Halley					
13. (Typed or printed name and capacity of person signing	application)				



NORTH CAROLINA Department of the Secretary of State

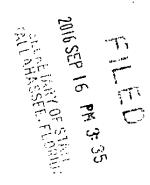
CERTIFICATE OF EXISTENCE

I, Elaine F. Marshall, Secretary of State of the State of North Carolina, do hereby certify that

SUMMIT UTILITY ADVISORS, INC.

is a corporation duly incorporated under the laws of the State of North Carolina, having been incorporated on the 9th day of October, 2014, with its period of duration being Perpetual.

I FURTHER certify that, as of the date set forth hereunder, the said corporation's articles of incorporation are not suspended for failure to comply with the Revenue Act of the State of North Carolina; that the said corporation is not administratively dissolved for failure to comply with the provisions of the North Carolina Business Corporation Act; that its most recent annual report required by N.C.G.S. 55-16-22 has been delivered to the Secretary of State; and that the said corporation has not filed articles of dissolution as of the date of this certificate.







Scan to verify online.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 13th day of September, 2016.

Elaine J. Marshall

Secretary of State