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1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500 ACCOUNT NO. : 12000000195 REFERENCE : 7353089 AUTHORIZATION COST LIMIT ORDER DATE: March 1, 2021 ORDER TIME : 11:12 AM ORDER NO. : 684459-015 CUSTOMER NO: 7353089 FOREIGN FILINGS NAME: FREEDOM SOLAR LLC XXXX QUALIFICATION (TYPE: LL) PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: CERTIFIED COPY XX____ PLAIN STAMPED COPY ____ CERTIFICATE OF GOOD STANDING

EXAMINER:

CONTACT PERSON: Alexxis Weiland -- EXT# 61592

CORPORATION SERVICE COMPANY

COVER LETTER

FREEDOM SOLAR, LLC BJECT:			
Nam	ne of Limited Liability Company	•	
	Company for Authorization to Transact Business in Florida, referenced foreign limited liability company to transact busi		
se return all correspondence concerning this matter	to the following:		
LAUREN ALDREDGE			
	Name of Person		
COKINOS YOUNG			
	Firm/Company C.	202	
900 S. CAPITAL OF TEXAS HWY	, SUITE 425	2021 KAR	
	Address	2	1
AUSTIN, TEXAS 78746	SSE SE	PH	m C
	City/State and Zip Code	ယ္	
LALDREDGE@COKINOSLAW.COM	M TÃ	56	
E-mail address: (to b	e used for future annual report notification)		
further information concerning this matter, please ca	all:		
LAUREN ALDREDGE	512 615-1148		
Name of Contact Person	Area Code Daytime Telephone Number		
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		
Enclosed is a check for the following amount: Please make check payable to: FLORIDA DEI \$\Blue{1}\$\$ \$125.00 Filing Fee \$\Blue{1}\$\$ \$130.00 Filing Fe Certificate of	ee & 🔲 \$155.00 Filing Fee & 🖂 \$160.00 Filing Fee.		

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLANCE WITH SECTION 605.0002, FLORIDA STATUTES, THE FOILOWING IN SUBMITTED TO REGISTER A FOREIGN. LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

FREEDOM SOLAR PO	Limited Liability Company; must include "Limite WER, LLC name adopted for the purpose of transacting business in F		
TEXAS	iame adopted to the purpose of transacting pusitiess in r	Source The anemate name must membe Timbe	ed Labinty Confuny, L.L.C. of Life.
7		3	number, if applicable)
(Jurisdiction under the law of which foreign limited liability company is organized)		(FEI)	number, if applicable)
4			20211
	(Date first transacted business in Florida, if prior to (See sections 605,0904 & 605 0905, F.S. to determ	registration) nine penalty liability)	FAR T
4801 Freidrich Lane		SAME 6.	2
(Street Address of Principal Office) Austin, Texas 78744		(Mailing Address)	SEE S
			<u> </u>
7. Name and <u>street addres</u> Name:	Sof Florida registered agent: (P.O. Boy Corporation Service Company	x <u>NOT</u> acceptable)	
		NOT acceptable)	
Name:	Corporation Service Company	NOT acceptable) NOT acceptable) 32301	
Name:	Corporation Service Company 1201 Hays Street	32301	(c)
Name: Office Address: Registered agent's accep Having been named as re designated in this applica to comply with the provisi	Corporation Service Company 1201 Hays Street Tallahassee	32301 Florida (Zip cod type cod process for the above stated limits registered agent and agree to a	ted liability company at the place uct in this capacity. I further agree

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]: Title or Capacity: Name and Address: Title or Capacity: Name and Address: Name: Bret Biggart Name: Chadwyck Preece □Manager □Manager Address: ___ 805 Single Oak Cv Address: ■Member **■**Member Austin, Texas 78746 Austin, Texas 78733 □ Authorized □ Authorized Person Person □Other______ ☐ Other_____ Other___ Meredith Jarrett □Manager □Manager Name: Address: ___ ■Member Address: □Member Austin, Texas 78703 □ Authorized □ Authorized Person Person □Other Other □Other Other □Manager Name: □Manager Name: _____ Address: Address: □Member ■ Member ☐ Authorized □ Authorized Person Person □Other____ □Other □Other_____ □Other Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Nonindexed individuals may be added to the index when filing your Florida Department of State Annual Report form. 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. Lauren Aldredge Signature of an authorized person LAUREN ALDREDGE Typed or printed name of signee



Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for Freedom Solar LLC (file number 803923419), a Domestic Limited Liability Company (LLC), was filed in this office on February 01, 2021.

It is further certified that the entity status in Texas is in existence.



In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on March 01, 2021.



Phone: (512) 463-5555

MAK

Ruth R. Hughs Secretary of State