

Florida Department of State
Division of Corporations
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

To:

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

From:

Account Name : CAPITOL SERVICES, INC.
Account Number : 120160000017
Phone : (855) 498-5500
Fax Number : (800) 432-3622

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

Email Address: _____

**FOREIGN PROFIT/NONPROFIT CORPORATION
SOLID POWER, INC.**

Certificate of Status	0
Certified Copy	1
Page Count	05
Estimated Charge	\$78.75

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**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.*

1. SOLID POWER, INC.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

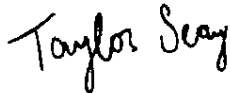
SOLID POWER OPERATING (FL), INC.
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
2. COLORADO 3. 36-4715727
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 08/03/2011 5. _____
(Date of incorporation) (Date of duration, if other than perpetual)
6. JULY 1, 2021
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. 486 S. PIERCE AVE., SUITE E, LOUISVILLE, CO 80027
(Principal office street address)

(Current mailing address, if different)
8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: CAPITOL CORPORATE SERVICES, INC.
Office Address: 515 E. PARK AVENUE, 2ND FL.
TALLAHASSEE, Florida 32301
(City) (Zip code)

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.



Taylor Seay, as Asst. Secretary on behalf of
Capitol Corporate Services, Inc.

(Registered agent's signature)

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.

11. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

A. DIRECTORS

☐ Chairman Name: Douglas Campbell

☐ Vice Chairman Address: c/o Solid Power, Inc.

☒ Director 486 S. Pierce Ave., Suite E

☐ President Louisville, CO 80027

☐ Vice President _____

☐ Secretary ☐ Treasurer

☒ Other CEO ☐ Other _____

☐ Chairman Name: David Jansen

☐ Vice Chairman Address: c/o Solid Power, Inc.

☒ Director 486 S. Pierce Ave., Suite E

☒ President Louisville, CO 80027

☐ Vice President _____

☐ Secretary ☐ Treasurer

☐ Other _____ ☐ Other _____

☐ Chairman Name: David Schroeder

☐ Vice Chairman Address: c/o Solid Power, Inc.

☒ Director 486 S. Pierce Ave., Suite E

☐ President Louisville, CO 80027

☐ Vice President _____

☐ Secretary ☐ Treasurer

☐ Other _____ ☐ Other _____

☐ Chairman Name: Matthew Jones

☐ Vice Chairman Address: c/o Solid Power, Inc.

☒ Director 486 S. Pierce Ave., Suite E

☐ President Louisville, CO 80027

☐ Vice President _____

☐ Secretary ☐ Treasurer

☐ Other _____ ☐ Other _____

☐ Chairman Name: Steve Goldberg

☐ Vice Chairman Address: c/o Solid Power, Inc.

☒ Director 486 S. Pierce Ave., Suite E

☐ President Louisville, CO 80027

☐ Vice President _____

☐ Secretary ☐ Treasurer

☐ Other _____ ☐ Other _____

☐ Chairman Name: Rainer Feurer

☐ Vice Chairman Address: c/o Solid Power, Inc.

☒ Director 486 S. Pierce Ave., Suite E

☐ President Louisville, CO 80027

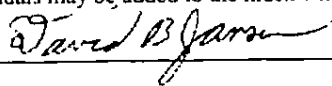
☐ Vice President _____

☐ Secretary ☐ Treasurer

☐ Other _____ ☐ Other _____

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

12.



Signature of Director or Officer

The officer or director signing this document (and who is listed in number 11 above) 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.

13.

David Jansen, President

(Typed or printed name and capacity of person signing application)

**ATTACHMENT TO APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION
TO TRANSACT BUSINESS IN FLORIDA**

SOLID POWER, INC. doing business in Florida as Solid Power Operating (FL), Inc.

Section 11. Names, titles, and addresses of the primary officers and/or directors:

Theodore Miller – Director
c/o Solid Power, Inc.
486 S. Pierce Ave., Suite E
Louisville, CO 80027

Stephen Fuhrman – CFO
c/o Solid Power, Inc.
486 S. Pierce Ave., Suite E
Louisville, CO 80027

OFFICE OF THE SECRETARY OF STATE
OF THE STATE OF COLORADO

CERTIFICATE OF FACT OF GOOD STANDING

I, Jena Griswold, as the Secretary of State of the State of Colorado, hereby certify that, according to the records of this office,

Solid Power, Inc.

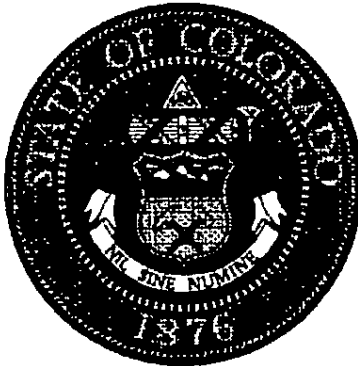
is a

Corporation

formed or registered on 08/03/2011 under the law of Colorado, has complied with all applicable requirements of this office, and is in good standing with this office. This entity has been assigned entity identification number 20111444872 .

This certificate reflects facts established or disclosed by documents delivered to this office on paper through 07/28/2021 that have been posted, and by documents delivered to this office electronically through 07/30/2021 @ 08:21:31 .

I have affixed hereto the Great Seal of the State of Colorado and duly generated, executed, and issued this official certificate at Denver, Colorado on 07/30/2021 @ 08:21:31 in accordance with applicable law. This certificate is assigned Confirmation Number 13335931 .



Secretary of State of the State of Colorado

*****End of Certificate*****
Notice: A certificate issued electronically from the Colorado Secretary of State's Web site is fully and immediately valid and effective. However, as an option, the issuance and validity of a certificate obtained electronically may be established by visiting the Validate a Certificate page of the Secretary of State's Web site, <http://www.sos.state.co.us/biz/CertificateSearchCriteria.do> entering the certificate's confirmation number displayed on the certificate, and following the instructions displayed. Confirming the issuance of a certificate is merely optional and is not necessary to the valid and effective issuance of a certificate. For more information, visit our Web site, <http://www.sos.state.co.us/> click "Businesses, trademarks, trade names" and select "Frequently Asked Questions."