19548277645

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H24000170373 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA0000000023 Phone : (614)280-3338 Fax Number : (614)573-3996

#Enter the email address for this business entity to be used for future andrew.tang@wartsila.com

FOREIGN PROFIT/NONPROFIT CORPORATION WARTSILA ENERGY STORAGE, INC.

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$78.75

Electronic Filing Menu Corporate Filing Menu

Help

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.

·	Wartsila Energy Storage,	Inc.		
	orporation; must include "INCORPORATED," orp," "Inc," "Co," or "Corp.")	"СОМРА!	VY." "CORPORATIO	.,"
(If name unavail	able in Florida, enter alternate corporate name ac	dopted for t	he purpose of transact	ing business in Florida)
Delaware	3.	72-1592991		
(State or countr 12/09/2022	y under the law of which it is incorporated) 5.		(FEI number, if a	applicable)
(Date	of incorporation)		ate of duration, if othe	r than perpetual)
Upon Filling				
485 Springpark P	(Date first transacted business in I (SEE SECTIONS 607.1501 & 607.150 face, Suite 1500, Herndon, VA 20170	•	-	ility)
·	(Principal office	e street add	lress)	
	(*****)	<u></u>	,	
	(Current mailing	address, if	different)	
	(Current mailing	address, if	different)	19119 1,
3. Name and stree	(Current mailing et address of Florida registered agent: (P.O.			
3. Name and <u>stree</u> Name:				2024
Name:	et address of Florida registered agent: (P.O.			2024 MAY
Name:	et address of Florida registered agent: (P.O. C T Corporation System			2024 MAY 10
Name:	et address of Florida registered agent: (P.O. C T Corporation System 1200 South Pine Island Road	Box <u>NO</u>	<u> </u> acceptable)	
Name: Office Address:	et address of Florida registered agent: (P.O. C.T Corporation System 1200 South Pine Island Road Plantation (City)	Box <u>NO</u>	_acceptable)	
Name: Office Address: Office Address: Office Address:	et address of Florida registered agent: (P.O. C T Corporation System 1200 South Pine Island Road Plantation (City) ent's acceptance: ed us registered agent and to accept service	Box <u>NOT</u> — — — FL e of proces	_acceptable) 33324 (Zip code) ss for the above state	ed corporation at the place
Name: Office Address: Registered age Having been nam designated in this further agree to c	et address of Florida registered agent: (P.O. C T Corporation System 1200 South Pine Island Road Plantation (City) ent's acceptance:	Box NOT FL FL e of procesent as regi	_acceptable) 33324(Zip code) ss for the above state stered agent and age e proper and compl	ed corporation at the place ree to act in this capacity.
Name: Office Address: Office A	et address of Florida registered agent: (P.O. C T Corporation System 1200 South Pine Island Road Plantation (City) ent's acceptance: ed as registered agent and to accept service application, I hereby accept the appointments omply with the provisions of all statutes reli	Box NOT FL FL e of proces ent as regilative to the ition as reg	_acceptable)	ed corporation at the place ree to act in this capacity, lete performance of my du
Name: Office Address: Registered ago Having been nam lesignated in this further agree to co and I am familiar	ex address of Florida registered agent: (P.O. C T Corporation System 1200 South Pine Island Road Plantation (City) ent's acceptance: eed as registered agent and to accept service application, I hereby accept the appointment omply with the provisions of all statutes religious with and accept the obligations of my positive the appointment of the accept the obligations of the positive with and accept the obligations of the accept the obligations of the accept the acc	Box NOT FL FL e of proces ent as regilative to the ition as reg	_acceptable) 33324(Zip code) ss for the above state stered agent and age e proper and compl	ed corporation at the place ree to act in this capacity, lete performance of my du

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

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

under the law of which it is incorporated.

A. DIRECTORS Mika Koivisto Andrew Tang Name: □Chairman □ Chairman 485 Springpark Place 485 Springpark Place Address: ☐ Vice Chairman □ Vice Chairman Suite 1500 Suite 1500 K Director **X**Director Herndon, VA 20170 Herndon, VA 20170 R President ☐ President □ Vice President □ Vice President ☐ Secretary ☐Treasurer □Secretary *Treasurer ☐Other____ □Other_____ ☐Other_____ □Other____ Andrew Tang Name:__ Gabriela Rivero □ Chairman □ Chairman 485 Springpark Place 485 Springpark Place ☐ Vice Chairman Address: ☐ Vice Chairman Address: Suite 1500 Suite 1500 **⊠**Director Director Herndon, VA 20170 Herndon, VA 20170 □President □ President □ Vice President Di Vice President ☐ Secretary □Treasurer ☐'Freasurer Secretary. 🗷 Other 🗋 □ Other 110ther _____ □Other____ □ Chairman □ Chairman □ Vice Chairman Address: _____ Address: ☐ Vice Chairman Director □Director El President ElPresident ☐ Vice President ___ ☐ Vice President ☐ Secretary □Treasurer ☐ 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.

05/09/2024

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.

Andrew Tang / CEO



I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "WARTSILA ENERGY STORAGE, INC." IS DULY

INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD

STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS

OF THIS OFFICE SHOW, AS OF THE NINTH DAY OF MAY, A.D. 2024.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

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

Authentication: 203435406

Date: 05-09-24