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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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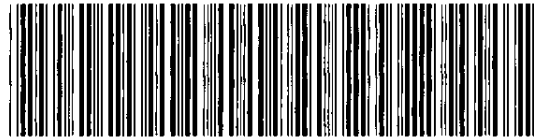
(Business Entity Name)

(Document Number)

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B. KOHR  
DEC 21 2009  
EXAMINER

# CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301  
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

SOLAR MANAGEMENT, LLC

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- ☐ Art of Inc. File
- ☐ LTD Partnership File
- ☐ Foreign Corp. File
- ☒ L.C. File
- ☐ Fictitious Name File
- ☐ Trade/Service Mark
- ☐ Merger File
- ☐ Art. of Amend. File
- ☐ RA Resignation
- ☐ Dissolution / Withdrawal
- ☐ Annual Report / Reinstatement
- ☒ Cert. Copy
- ☐ Photo Copy
- ☐ Certificate of Good Standing
- ☒ Certificate of Status
- ☐ Certificate of Fictitious Name
- ☐ Corp Record Search
- ☐ Officer Search
- ☐ Fictitious Search
- ☐ Fictitious Owner Search
- ☐ Vehicle Search
- ☐ Driving Record
- ☐ UCC 1 or 3 File
- ☐ UCC 11 Search
- ☐ UCC 11 Retrieval

Signature

Requested by:

Name

Date

Time

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**ARTICLES OF ORGANIZATION  
FOR FLORIDA LIMITED LIABILITY COMPANY**

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**ARTICLE I-Name:**

The name of the Limited Liability Company is:

**SOLAR MANAGEMENT, LLC**

**ARTICLE II- Address:**

The mailing address and street address of the principal office of the Limited Liability Company is:

**Principal Office Address:**

**14025 Riveredge Drive, Suite 320  
Tampa, Florida 33837-2015**

**Mailing Address:**

**14025 Riveredge Drive, Suite 320  
Tampa, Florida 33837-2015**

**ARTICLE III-**

**Registered Agent, Registered Office, & Registered Agent's Signature:**

The name and the Florida street address of the registered agent are:

**ABEL A. LOPEZ**

**14025 Riveredge Drive, Suite 320  
Tampa, Florida 33837-2015**

*Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.*

Registered Agent's Signature

**ARTICLE IV- Managing Members:**

The name and address of each Managing Member is as follows:

**Title:**

"MGRM"= Managing Member

**Name and Address:**

"MGRM" ABEL A. LOPEZ

**14025 Riveredge Drive, Suite 320  
Tampa, Florida 33837-2015**

"MGRM" MARK ROBLES

**14025 Riveredge Drive, Suite 320  
Tampa, Florida 33837-2015**

MEMBER

Name and Address

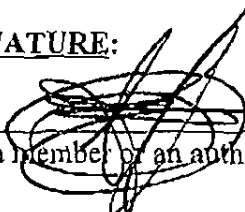
CHARTRIC DARBY

14025 Riveredge Drive, Suite 320  
Tampa, Florida 33837-2015

ARTICLE V: Effective date:

**SOLAR MANAGEMENT, LLC shall commence its existence upon the date these Articles of Organization are filed by the Florida Department of State.**

REQUIRED SIGNATURE:

  
\_\_\_\_\_  
Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

ABEL A. LOPEZ  
Typed Name of Signee