(Req	uestor's Name)	
(Addi	ress)	
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(Doc	um e nt Number)	
Certified Copies	Certificates	s of Status
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15 JUL 30 PH 2: 23

JUL 3 0 2015 T SCHROEDER CORPORATION SERVICE COMPANY
1201 Hays Street
Tallhassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO.: I20000000195

REFERENCE: 728931 8056469

AUTHORIZATION:
COST LIMIT: \$125.00

ORDER DATE: July 30, 2015

ORDER TIME: 12:47 PM

DOMESTIC FILING

NAME:

ORDER NO. : 728931-005

CUSTOMER NO: 8056469

NORTHWEST JACKSONVILLE SOLAR

PARTNERS, LLC

EFFECTIVE DATE:

ARTICLES OF INCORPORATION

CERTIFICATE OF LIMITED PARTNERSHIP

XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

XX PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Courtney Williams - EXT. 62935

EXAMINER'S INITIALS:

COVER LETTER

TO: Registration Section Division of Corporations	·
SUBJECT: Northwest Jacksonville Solar I	
Name of L	imited Liability Company
The enclosed Articles of Organization and fee(s) a	are submitted for filing.
Please return all correspondence concerning this n	natter to the following:
Colleen Muldoon	Name of Person
Global Resource Options Inc.	Firm/Company
205 Billings Farm Rd., Bldg #4	Address
White River Junction, VT 0500	I City/State and Zip Code
accounting@grosolar.com E-mail address: (to be use	d for future annual report notification)
For further information concerning this matter, plea	se call:
Tom LaCasce at (802) 359-6617 Area Code Daytime Telephone Number
Enclosed is a check for the following amount:	
\$125.00 Filing Fee \$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & \$160.00 Filing Fee, Certified Copy (additional copy is enclosed) \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address	Street Address
New Filing Section	New Filing Section
Division of Corporations P.O. Box 6327	Division of Corporations Clifton Building
Tallahassee, FL 32314	2661 Executive Center Circle

2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name: The name of the Limited Liability	y Company is:			
Northwest Jackson (Must end v			mpany, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street ad	dress of the principal c	office of the Li	mited Liability Company is:	
<u>Principa</u>	l Office Address:		Mailing Ac	dress:
205 Billings Farm White River Junct			205 Billings Farm Roa White River Junction,	
ARTICLE III - Registered Age (The Limited Liability Company another business entity with an a	cannot serve as its own	Registered A		individual or
The name and the Florida street a	ddress of the registered	l agent are:		
	Corporation Serv	ice Compar Name	<u>y</u>	
`	1201 Hays Street			
	Florida street addres	s (P.O. Box <u>N</u>	OT acceptable)	
	Tallahassee	FL	32301	
	City	State	Zip	

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 605, F.S..

Stephanie Milnes

(CONTINUED)

Registered Agent's Signature (REQUIRED)

Asst. Vice President

Page 1 of 2

15.111 30 PM 3-10

Title: "AMBR" = Authorized Member	Name and Address:	
"MGR" = Manager	TO THE PARTY OF TH	
Global Resource Options Inc. (MGR)	205 Billings Farm Rd., Bldg #4	
	White River Junction, VT 05001	
(Use attachment if necessary)		
ARTICLE V: Effective date, if other than the date of filing an effective date is listed, the date must be specific a	пg (Ог ПОТТЕ)	
he date of filing.) Note: If the date inserted in this block does not meet the document's effective date on the Department of States.	ne applicable statutory filing requirements, this date will not b	
he date of filing.) Note: If the date inserted in this block does not meet the document's effective date on the Department of States.	ne applicable statutory filing requirements, this date will not b	
he date of filing.) Note: If the date inserted in this block does not meet the document's effective date on the Department of State ARTICLE VI: Other provisions, if any. REOUIRED SIGNATURE: Signature of a member This document is executed in	or an authorized representative of a member. accordance with section 605.0203 (1) (b), Florida Statutes.	
he date of filing.) Note: If the date inserted in this block does not meet the document's effective date on the Department of State ARTICLE VI: Other provisions, if any. REOUIRED SIGNATURE: Signature of a member This document is executed in I am aware that any false infor constitutes a third degree felor	or an authorized representative of a member. accordance with section 605.0203 (1) (b), Florida Statutes. mation submitted in a document to the Department of State may as provided for in s.817.155, F.S.	
REOURED SIGNATURE: Signature of a member This document is executed in I am aware that any false infor constitutes a third degree felor. James P. I.	or an authorized representative of a member. accordance with section 605.0203 (1) (b), Florida Stanutes. mation submitted in a document to the Department of State my as provided for in s.817.155, F.S. Resor	
REOURED SIGNATURE: Signature of a member This document is executed in I am aware that any false infor constitutes a third degree felor. James P. I.	or an authorized representative of a member. accordance with section 605.0203 (1) (b), Florida Statutes. mation submitted in a document to the Department of State may as provided for in s.817.155, F.S.	

ARTICLE IV-

Page 2 of 2

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)