

**L21000280144**

Florida Department of State

Division of Corporations  
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**FLORIDA LIMITED LIABILITY CO.  
ENERGETICOS POWER USA, LLC.**

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$130.00

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**  
**ENERGETICOS POWER USA, LLC.**

**ARTICLE I: NAME**

The name of the Limited Liability Company is:

**ENERGETICOS POWER USA, LLC.**

**ARTICLE II: ADDRESS**

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

**2496 Orchid Bay Dr.  
Naples, FL 34109**

The mailing address of the Limited Liability Company is:

**2496 Orchid Bay Dr.  
Naples, FL 34109**

**ARTICLE III: PURPOSE**

The purpose for which this Limited Liability Company is organized is:

**ANY AND ALL LAWFUL BUSINESS**

**ARTICLE VI: REGISTERED OFFICE AND AGENT**

The name and the Florida street address of the Registered Office and Agent are:

**STEVEN HACKETT  
2496 Orchid Bay Dr.  
Naples, FL 34109**

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.



**STEVEN HACKETT**

Registered Agent's Signature

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#### **ARTICLE IV: MANAGER(S) OR MANAGING MEMBER(S)**

The name and address of each person authorized to manage and control the Limited Liability Company:

Title: MGRM

**JAIR SEGURA**  
2496 Orchid Bay Dr.  
Naples, FL 34109

Title: MGRM

**JAIME SEGURA**  
2496 Orchid Bay Dr.  
Naples, FL 34109

Title: MGRM

**MARISOL SEGURA**  
2496 Orchid Bay Dr.  
Naples, FL 34109

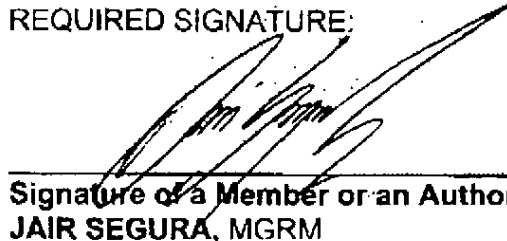
Title: MGRM

**ELSI SEGURA**  
2496 Orchid Bay Dr.  
Naples, FL 34109

#### **ARTICLE V: EFFECTIVE DATE**

The effective date for this Limited Liability Company shall be:  
**JUNE 14, 2021**

REQUIRED SIGNATURE:



Signature of a Member or an Authorized representative of a Member  
**JAIR SEGURA, MGRM**

I am the member or authorized representative submitting these Articles of Organization and affirm that the facts stated herein are true. 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. I understand the requirement to file an annual report between January 1<sup>st</sup> and May 1<sup>st</sup> in the calendar year following formation of the LLC and every year thereafter to maintain "active" status.