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| Special Instructions to Filing Officer: | | | | | |
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| SUR. | JECT: NATION | WIDE SOLAR INSTALL | ER SERVICES I | LLC | | |
| | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | sulting Florida Lin | | mpany) | |
| The e | enclosed Article ness Entity" into | s of Conversion, Artic a "Florida Limited L | eles of Organiza iability Compa | ition, ar ny" in a | nd fees are submitt accordance with s. | ed to convert an "Other 605.1045, F.S. |
| Pleas | e return all corre | espondence concernin | g this matter to | : | | |
| RANG | DY ROSA, ESQ. | | | | | |
| | | (Contact Person) | | | | |
| GOL | DMAN & ROSA, F | P.A. | | | | |
| | | (Firm/Company) | | | | |
| 320 S | E 18TH STREET | Г | | | | |
| | - | (Address) | | _ | | |
| FT LA | UDERDALE, FL | ORIDA 33316 | | | | 2028 ETG 14 - ES |
| | ((| City, State and Zip Code) | | _ | | |
| RANE | Y@GOLDMANF | ROSA.COM | | | | 2 |
| E-1 | mail Address: (to b | e used for future annual re | port notifications) | | | = |
| For fi | arther information | on concerning this ma | tter, please call | : | | 7:4 |
| RANC | OY ROSA, ESQ. | | _at (| 565- | 4311 | · • • • • • • • • • • • • • • • • • • • |
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| | | or the following amou a bank located in the | | proces | sed by this office r | must be payable in US |
| (\$25 fc & \$12: | 50.00 Filing Fees or Conversion 5 for Articles anization) | S155.00 Filing Fees and Certificate of Status | S180.00 Filin and Certified Co | | ☐S185.00 Filing For Certified Copy, and Certificate of Status | I |
| Mailing Address: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 | | | | New Divis The C | t Address: Filing Section tion of Corporation Centre of Tallahass N. Monroe Street, | ee |

Tallahassee, FL 32303

Articles of Conversion

For

"Other Business Entity"

Into

Florida Limited Liability Company

The Articles of Conversion and attached Articles of Organization are submitted to convert the following -

"Other Business Entity" into a Florida Limited Liability Company in accordance with s.605.1045, Florida Statutes. 1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: NATIONWIDE SOLAR INSTALLER SERVICES INC. (Enter Name of Other Business Entity) CORPORATION · 2. The "Other Business Entity" is a (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.) First organized, formed or incorporated under the laws of (Enter state, or if a non-U.S. entity, the name of the country) 02/01/2022 no (date of organization, formation or incorporation) 3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: NATIONWIDE SOLAR INSTALLER SERVICES LLC (Enter Name of Florida Limited Liability Company) 4. If not effective on the date of filing, enter the effective date: (The effective date: Cannot be prior to date of receipt or filed date nor more than 90 calendar days after the date this document is filed by the Florida Department of State.) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. 5. The plan of conversion has been approved in accordance with all applicable statutes.

6. The "Converted or Other Business Entity" has agreed to pay any members having appraisal rights the amount to

which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.

| Signed this 9 | day of AUGUST | 20 24 |
|-----------------|--|---------------------------------------|
| Signature of A | Authorized Representative of Lim | ited Liability Company: |
| Signature of A | uthorized Representative: | O ^p |
| Printed Name: | uthorized Representative: | Title: PRESIDENT |
| - | | |
| Signature(s) o | n behalf of Other Business Entity: | [See below for required signature(s)] |
| C' . | \/(\)/\ | |
| Signature: | VINCENT IAFANO | Title: PRESIDENT |
| Trimed Name | THOUSE THE PROPERTY OF THE PRO | THE. THEOLOGIA |
| Signature: | | |
| Printed Name: | | Title: |
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| Printed Name | | Title: |
| | | - Inter- |
| If Florida Cor | | ÷ |
| | nairman, Vice Chairman, Director, or | |
| If Directors or | Officers have not been selected, an In | corporator must sign. |
| If Florida Con | eral Partnership or Limited Liabili | ty Dartnarchin |
| | e General Partner. | ty ratticismp. |
| C | | |
| | <u>ited Partnership or Limited Liabili</u> | ty Limited Partnership: |
| Signatures of A | LL General Partners. | |
| All others: | | |
| | authorized person. | |
| | person. | |
| Fees: | | |
| Article | s of Conversion: | \$25.00 |
| | r Florida Articles of Organization: | \$125.00 |
| | ed Copy: | \$30.00 (Optional) |
| Certific | cate of Status: | \$5.00 (Optional) |

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

| The name of the Limited Liability Company is | |
|--|--|
| | |
| NATIONWIDE SOLAR INSTALLER SERVICES LL | C |
| (Must contain the words "Limited Liabili | ty Company, "L.L.C.," or "LLC.") |
| ARTICLE II - Address: | |
| The mailing address and street address of the p | rincipal office of the Limited Liability Company is: |
| Principal Office Address: | Mailing Address: |
| 5280 N. UNIVERSITY DRIVE | 5280 N. UNIVERSITY DRIVE |
| LAUDERHILL, FLORIDA 33351 | LAUDERHILL, FLORIDA 33351 |
| | |
| ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.) | |
| The name and the Florida street address of the | registered agent are: |
| GOLDMAN & ROSA, P.A. | |

FORT LAUDERDALE FL 33316

City Zip

Florida street address (P.O. Box NOT acceptable)

Name

320 SE 18TH STREET

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..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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

| <u>Title:</u> "AMBR" = Authorized Member | Name and Address: | | | | |
|--|--|--|--|--|--|
| "MGR" = Manager AMBR | VINCENT IAFANO 5280 NORTH UNIVERSITY DRIVE LAUDERHILL, FLORIDA 33351 | | | | |
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| (Heaptrophyson if managemy) | | | | | |
| (Use attachment if necessary) RTICLE V: Other provisions, if any. | | | | | |
| REQUIRED SIGNATURE: | | | | | |
| Signature of a member or a | an authorized representative of a member | | | | |

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes, 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.

VINCENT IAFANO

Typed or printed name of signee

Filing Fees

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)