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From:

Account Name : CORPORATION SERVICE COMPANY

Account Number : I2000000195 Phone

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FLORIDA/FOREIGN LIMITED LIABILITY CO.

Palm Power LLC

Certificate of Status	0
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Electronic Filing Menu

Corporate Filing Menu

MOJ-10033

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE POLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:	
, Palm Power LLC	
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")	
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and anach a copy of the consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liabili Company," "L.L.C.," "LLC.")	
2. Delaware 3. 94-3115336	
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)	
4. November 20,1989 5 perpetual	
(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")	
6	
(Date tirst transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)	
7. 9405 Arrowpoint Boulevard, Charlotte, NC 28273	
(Street Address of Principal Office)	
8. If limited liability company is a manager-managed company, check here	
9. The name and usual business addresses of the managing members or managers are as follows:	
Thomas J. Bonner, 9405 Arrowpoint Blvd. Charlotte, NC 28273	200
John W. O'Connor, 9405 Arrowpoint Blvd. Charlotte, NC 28273	10N (
Elizabeth L. Rippetoe, 9405 Arrowpoint Blvd. Charlotte, NC 28273	1-7
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of lexithe jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translation must be submitted.)	Pm 1: 29
•	
holding company	
Elizabeth Rageton	
Signature of a member or an authorized representative of a member. (In accordance with section 608,408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)	
Elizabeth 1. Ripoetoe Typed or printed name of signee	

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

Palm Power LLC If name unavailable, the alternate name to be used in the state of Florida is: 2. The name and the Florida street address of the registered agent and office are: Corporation Service Company (Name) 1201 Hays Street Florida Street Address (P.O. Box NOT ACCEPTABLE) Tallahassee FL 32301 City/State/Zip Having been named as registered agent and to accept service of process for the above stated limited.	I. The name	of the Limited Liability Co	mpany is:	
2. The name and the Florida street address of the registered agent and office are: Corporation Service Company (Name) 1201 Hays Street Florida Street Address (P.O. Box NOT ACCEPTABLE)	Palm Powe	r LLC		
Corporation Service Company (Name) 1201 Hays Street Florida Street Address (P.O. Box NOT ACCEPTABLE)	If name unav	vailable, the alternate name t	to be used in the state of Florida is:	
(Name) 1201 Hays Street Florida Street Address (P.O. Box NOT ACCEPTABLE)	2. The name	and the Florida street addre	ess of the registered agent and office are:	
1201 Hays Street Florida Street Address (P.O. Box NOT ACCEPTABLE)		Corporation Service	Company	
Florida Street Address (P.O. Box NOT ACCEPTABLE)			(Name)	
(
Tallahassee FL 32301 TALE CREATER TO THE SECOND TO THE SEC		Florida S tree t A	Address (P.O. Box NOT ACCEPTABLE)	
City/State/Zip AR HE OV		Tallahassee	<u> </u>	2007 SE(
	liability comp agent and agr relating to the obligations of	nany at the place designated to ree to act in this capacity. If the proper and complete perform from position as registered agon Service Company Lah L. Leak	nd to accept service of process for the above stated link In this certificate, I hereby accept the appointment as resorted and accept the appointment as resorted and accept the accept that are accept the accept that are accept that are accept that accept the accept that are accept that accept the accept that accept the accept the accept the accept the accept that accept the accept th	The Table 25

\$ 25.00 Designation of Registered Agent
 \$ 30.00 Certified Copy (optional)
 \$ 5.00 Certificate of Status (optional)

Delaware

PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "PALM POWER LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE SEVENTH DAY OF NOVEMBER, A.D. 2007.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "PALM POWER LLC" WAS FORMED ON THE TWENTIETH DAY OF NOVEMBER, A.D. 1989.

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

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

2213925 8300 071199224



AUTHENTICATION: 6140336

DATE: 11-07-07