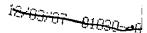
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(Business Entity Name)	
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SECRETARY DE STATES DIVISION OF A PH 3: 20

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#### **COVER LETTER**

TO: Registration Section Division of Corporations	·
SUBJECT: Watt Wizard, LLC	
(Name of Limite	ed Liability Company)
	lity Company for Authorization to Transact Business in mitted to register the above referenced foreign limited .
Please return all correspondence concerning this mat	tter to the following:
Pertti Tiilikka	
(Nam	e of Person)
Watt Wizard, LLC	
(Firm	/Company)
286 Vandora Suits Rd.	
(A	Address)
Murphy, NC 28906	
(City/State	e and Zip Code)
For further information concerning this matter, pleas	ee call:
Tuula Uuranniemi	at (561 ) 994-0280
(Name of Person)	(Area Code & Daytime Telephone Number)
	STREET ADDRESS: Division of Corporations
P.O. Box 6327	Clifton Building
· · · · · · · · · · · · · · · · · · ·	2661 Executive Center Circle Tallahassee, FL 32301
Enclosed is a check for the following amount:  \$\Begin{array}{c} \pm \\$125.00 \text{ Filing Fee} & \Begin{array}{c} \Pm \\$130.00 \text{ Filing Fee} & \text{ Certificate of Second Filing Fee} & \tex	\$155.00 Filing Fee & \$\int\\$160.00 Filing Fee, Certificate tatus Certified Copy of Status & Certified Copy

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

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

LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:  1. Watt Wizard, 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 attach a copy of the writt consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C.," "LLC.")
2. North Carolina (Jurisdiction under the law of which foreign limited liability)  3. (FEI number, if applicable)
company is organized)
4. 10/08/2007 (Date of Organization)  5. Perpetual (Duration: Year limited liability company will cease to exist or "perpetual")
6.
(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)
7. 286 Vandora Suits Rd.
Murphy, NC 28906
(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:
Pertti Tiilikka
286 Vandora Suits Rd.
Murphy, NC 28906
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records the 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 translator must be submitted.)  11. Nature of business or purposes to be conducted or promoted in Florida: Electrical contractor
Perto Guell_
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.)  Pertti Tillikka

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.

Watt Wizard, LLC		
If name unavai	lable, the alternate name to be used in the state of Florida is:	
2. The name a	nd the Florida street address of the registered agent and office are:	
	Tuula Uuranniemi (Name)	
	7634 NW 6th Ave.  Florida Street Address (P.O. Box NOT ACCEPTABLE)	
	Boca Raton, FL 33487 FL 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 608, Florida Statutes.

(Signature)

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)



## NORTH CAROLINA Department of The Secretary of State

## CERTIFICATE OF EXISTENCE (Limited Liability Company)

I, ELAINE F. MARSHALL, Secretary of State of the State of North Carolina, do hereby certify that

#### WATT WIZARD, LLC

is a limited liability company duly formed under the laws of the State of North Carolina, having been formed on the 8th day of October, 2007, with its period of duration being Perpetual.

I FURTHER certify that the said limited liability company's articles of organization are not suspended for failure to comply with the Revenue Act of the State of North Carolina; that the said limited liability company is not administratively dissolved for failure to comply with the provisions of the North Carolina Limited Liability Company Act; and that the said limited liability company has not filed articles of dissolution as of this date of this certificate.



IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 1st day of November, 2007.

Elaine I. Marshall

**Secretary of State**