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(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificate	s of Status		
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July \$ 2011

EXAMINER



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DEPARAMENT OF STATE DIVISION OF CONTORATIONS TALLAHASSEE, FLORIDA

RECEIVED

B. KOHR
JUN 9 2011
EXAMINER

1. 10

SECRETARY OF STATE
INVISION OF CORPORATIONS



ON SERVICE COMPANY"	
ACCOUNT NO. : I2000000195	
REFERENCE : 805082 5151541	
AUTHORIZATION: Spellike man	
COST LIMIT : \$ 125.00	
ORDER DATE : June 8, 2011	9
ORDER TIME: 4:39 PM	11 JUN -9
ORDER NO. : 805082-005	9
CUSTOMER NO: 5151541	9 7
	- نس ب
FOREIGN FILINGS	5
NAME: SKYLINE INNOVATIONS, LLC	
XXXX QUALIFICATION (TYPE: CO)	
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:	
CERTIFIED COPY XXX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING	
CONTACT PERSON: Matthew Young EXT# 2962	

EXAMINER:

COVER LETTER

TO:	Registration Section Division of Corporations	
SUBJE	CCT: Skyline Innovations, LLC	·*
		ne of Limited Liability Company
The end Existen	closed "Application by Foreign Limited Liabi ce, and check are submitted to register the ab	ility Company for Authorization to Transact Business in Florida," Coove referenced foreign limited liability company to transact busines
Please r	return all correspondence concerning this mat	tter to the following:
	Zach Axelrod	
		Name of Person
	Skyline Innovations, LLC	
		Firm/Company
	1752 Columbia Road, NW, S	Suite 2
		Address
	Washington, DC 20009	
		City/State and Zip Code
	zaxelrod@skylineinnovations	
	E-mail address: (to	o be used for future annual report notification)
For furt	her information concerning this matter, pleas	e call:
	Zach Axelrod	at (202) 719-5297
	Name of Person	Area Code & Daytime Telephone Number
	MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314	STREET ADDRESS: Division of Corporations Registration Section Cliston Building 2661 Executive Center Circle Tallahassee, FL 32301
Enclos	sed is a check for the following amoun \$125.00 Filing Fee \$\int \text{\$\sum_\$130.00 Filing Fee}\$ Certificate of State	e & S155.00 Filing Fee & S160.00 Filing Fee, Certificate

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

IN COMPLIANCE WITH SECTION 608503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

Skyline Innovations, LLC	
	<u>}</u>
4	15
(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 print onsent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C," "LLC.")	
Delaware 3, 27-1050392	٠
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)	3
October 1, 2009 5. Perpetual	
(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")	
(Date first transacted business in Florida, if prior to registration.)	
(See sections 608.501 & 608.502 F.S. to determine penalty liability)	
7. 1752 Columbia Road NW, Suite 2, Washington, DC 20009	
(Street Address of Principal Office)	
· · · · · · · · · · · · · · · · · · ·	
3. 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:	
Zachary Axelrod, 1752 Columbia Road NW, Washington DC 20009	
· · · · · · · · · · · · · · · · · · ·	
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 ranslation of the certificate under cath of the translator must be submitted.)	in
11. Nature of business or purposes to be conducted or promoted in Florida:	
Solar power implentation	
Shall All	
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. 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.)	
Zach Axelrod	
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.

	ovations, LLC		<u> </u>
f unavailable	e, the alternate to be used in	the state of Florida is:	
•			
. The name	and the Florida street addre	ess of the registered agent and office are	:
	•		
	Corporation Service Cor	mpany	
		(Name)	
	1201 Hays Street		
	Florida Street	Address (P.O. Box NOT ACCEPTABLE)	
	Tallahassee	_{FL} 32301	
		City/State/Zip	

edrelating 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.

Corporation Service Company Matthew Young Asst. V. Pres. (Signature)

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

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "SKYLINE INNOVATIONS, 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 EIGHTH DAY OF JUNE, A.D. 2011.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SKYLINE INNOVATIONS, LLC" WAS FORMED ON THE FIRST DAY OF OCTOBER, A.D. 2009.

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

4737352 8300

110702762

Jeffrey W. Bullock, Secretary of State

AUTHENT\(CATION: 8819659\)

DATE: 06-08-11

You may verify this certificate online at corp.delaware.gov/authver.shtml