M/1000005826

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
Special Instructions to Filing Officer: WA. LUNT
NOV 18 2011
EXAMINER





600213343746

10/26/11--01019--011 **130.00





October 27, 2011

DAVID PEARSALL 69 BANK STREET NEW MILFORD, CT 06776

SUBJECT: PEOPLE'S POWER, LLC

Ref. Number: W11000055041

We have received your document for PEOPLE'S POWER, LLC and your check(s) totaling \$130.00. However, the document has not been filed and is being retained in this office for the following:

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6094.

Agnes Lunt Regulatory Specialist II

Letter Number: 811A00024541

COVER LETTER

TO:	Registration Section Division of Corporations		
SUBJI	ECT: PEOPLE'S POWER, LLC		
5020.	Name of Limited Liability Company		
	iclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florid nce, and check are submitted to register the above referenced foreign limited liability company to transact bu		
Please	return all correspondence concerning this matter to the following:		
	David Pearsall		
	Name of Person	-	
	People's Power, LLC	2011 NOV 17	
	Firm/Company	TO V	<u> </u>
	69 Bank Street		
	New Milford, CT 06776		5
	City/State and Zip Code	_	
	Reg@peoplespower.com E-mail address: (to be used for future annual report notification)	- -	
For fur	rther information concerning this matter, please call:		
	Name of Person Area Code & Daytime Telephone Number		
	Name of Person Area Code & Daytime Telephone Number		;
	MAILING ADDRESS: STREET ADDRESS: Division of Corporations Division of Corporations		
	Registration Section Registration Section P.O. Box 6327 Clifton Building		
	Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301		
Enclo	sed is a check for the following amount:		
	\$125.00 Filing Fee \Bar{\text{S130.00 Filing Fee & Certified Copy}} \$160.00 Filing Fee, Certified Copy} \$160.00 Filing Fee, 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 BUSINESS IN THE STATE OF FLORIDA:

PEOPLE'S 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 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.")	en:
2. Delaware (Jurisdiction under the law of which foreign limited liability company is organized) 3. 27-4463471 (FEI number, if applicable)	
4. 12/23/2010 (Date of Organization) 5. Perpetual (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. 1217 East Cape Coral Parkway, Suite 220	
Cape Coral, FL 33904 (Street Address of Principal Office)	7
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:	!
Pearsall Holdings LP	
69 Bank Street	
New Milford, CT 06776	
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: Holding Company	in
. I value of business of purposes to be conducted of promoted in Frontai.	
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.)	

Typed or printed name of signee

David Pearsall

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.

If unavaila	ble, the alternate to be used in the	state of Florida is:	
2. The nar	me and the Florida street address o	f the registered agent and office	are:
	Corporation Service Com	npany	79. SE
		(Name)	Control No.
	1201 Hays Street	`	2011 NOV 17 SECRETARY ALLAHASSE
Florida Street Address (P.O. Box NOT ACCEPTABLE).			
	Tallahassee	FL 32301	PLORIDA
	The second secon	City/State/Zip	
liability cor agent and a relating to t	en named as registered ugent and to inpuny at the place designated in thi agree to act in this capacity. I furth the proper and complete performan of my position as registered agent of	is certificate. I hereby accept the certage of the certage of the province of my duties, and I am familian as provided for in Chapter 608, F	appointment as registered sions of all statutes r with and accept the

\$ 30.00 Certified Copy (optional) \$ 5.00 Certificate of Status (optional)



PAGE 1

The First State

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

DELAWARE, DO HEREBY CERTIFY "PEOPLE'S POWER & GAS 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 NOVEMBER, A.D. 2011.

4918253 8300

111154424

AUTHENT CATION: 9144881

DATE: 11-08-11

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