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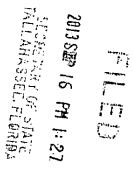
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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COVER LETTER

TO:	Registration Section
	Division of Corporations

SUBJECT: TCB Soltec, LLC

Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

James Cato	
Name of Person	
TCB, LLC	2013 SET
Firm/Company	3 = 7,€
3888 Rolling Road	55E 6 P
Address	* 1 - 2
Scottsville, VA 24590	: 27
City/State and Zip Code	
jcato2277@aol.com	
E-mail address: (to be used for future annual report n	otification)

For further information concerning this matter, please call:

James Cato	434	906-2286
Name of Person	Area Code & Daytime	relephone Number

MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314 STREET ADDRESS:
Division of Corporations
Registration Section
Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Enclosed is a check for the following amount:

\$\ \begin{align*} \be

WRITTEN CONSENT TO ADOPT ALTERNATE NAME FOR USE IN THE STATE OF FLORIDA

We, the undersigned, do hereby certify that we are the Managers and/or Managing
Members of TCB, LLC
(Name of Limited Liability Company)
a limited liability company duly organized and existing under the laws of
Delaware
(State or Country of Organization)
Because the name of this foreign limited liability company does not satisfy the
requirements of the s. 608.406, F.S., the limited liability company hereby adopts the
following name to transact business in the state of Florida:
TCB Soltec, LLC
(Name to be used by limited liability company in Florida. NOTE: Name must end with Limited Liability
Date: August 22, 2013
Signature(s) of Manager(s) and/or Managing Member(s):
Mis L Coto, manager
Manager Manager
MANAGER
CR2E122 (7/07) :

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:

LIIVII	TOD I LO
1	TCB, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
TCE	Soltec, LLC
	ime unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written
cons	ent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability
Com	pany," "L.L.C," "LLC.")
2. [elaware 3, 80-0585336
	risdiction under the law of which foreign limited liability (FEI number, if applicable) mpany is organized)
4.	2/18/2010 5. Perpetual
	(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")
6.	01/02/213
	(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)
7	8888 Rolling Road
9	Scottsville, VA 24590
	(Street Address of Principal Office)
8. I	f 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:
	James Cato, 3888 Rolling Road, Scottsville, VA 24590
	Marc Barry, 6826 Hill Park Dr, Suite 100, Lorton, VA 22079
,	Jim Tierney, 6826 Hill Park Dr, Suite 100, Lorton, VA 22079
thej	Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in its organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a lation of the certificate under oath of the translator must be submitted.)
11.	Nature of business or purposes to be conducted or promoted in Florida: wholesale distribution
-	Armer Sto, manager

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

James Cato

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.

TCB, LLC			_
If unavailable, the alternate to	be used in the state of Florida is:		
TCB Soltec, LLC			-
2. The name and the Florida s	treet address of the registered agent and office are:		
	United Corporate Services, Inc.		2
	(Name)	ALLAH)	5 } ~~
9200 \$	South Dadeland Blvd., Suite 508	65 2	** ****
F	orida Street Address (P.O. Box NOT ACCEPTABLE)	_ 367 o CO	-
	Miami, _{FL} 33156		· P.
	City/State/Zip		;
Having been named as register	ed agent and to accept service of process for the above	stated limited	

obligations of my position as registered agent as provided for in Chapter 608, Florida Statutes.

Muhael & Bore
(Signature)

Michael A. Barr, President

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

Delaware

DACE

The First State

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

DELAWARE, DO HEREBY CERTIFY "TCB, 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 SIXTH DAY OF SEPTEMBER, A.D. 2013.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "TCB, LLC" WAS FORMED ON THE EIGHTEENTH DAY OF FEBRUARY, A.D. 2010.

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

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AUTHENT CATION: 0717823

DATE: 09-06-13

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