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(Requestor's Name) (Address) (Address)	000280889120
(City/State/Zip/Phone #)	01/13/1601002003 **125.00
(Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:	16 JAN 12 PH 3: 43 SUFFICIENCY OF FILMS
Office Use Only	16 JAN 12 AN 8: 43

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INC.	INC. 236 East 6th Avenue. Tallahassee, Florida 32303 P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666				
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COVER LETTER

TO: **Registration Section Division of Corporations**

ENEXIO US LLC SUBJECT:

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:

.

		Name of Person	
Registe	red Agent S	olutions, Inc	
		Firm/Company	
1701 D	irectors Blvc	Suite 300	
		Address	
Austin ⁻	TX 78744		
	City	State and Zip Code	
cathy.po	owers@ene	xio.com	
	E-mail address: (to be us	ed for future annual report not	ification).
For further information concerning	g this matter, please call:		
	<u>* = '</u> ,''	at ()	
Name o	f Contact Person	Area Code	Daytime Telephone Number
MAILING ADDRESS: ST		ET ADDRESS:	
•		on of Corporations	
Ŭ U	Registration Section Registration Section		
•••••••••	P.O. Box 6327 Clifton Building		
Tallahassee, FL 32314	4 2661 Executive Center Circle Tallahassee, FL 32301		
Enclosed is a check for the f	ollowing amount:		
S125.00 Filing Fee	□ \$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy	k

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

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

ENEVIOURILO

name unavailable, enter alternate name adopted for the purpose of transacting business in Florid (bility Company," "L.L.C," or "LLC,")	a. The alternate name must include "Lim
Delaware 3. 81-08	88754
elaware risdiction under the law of which foreign limited liability mpany is organized) 3. 81-0888754 (FEI number, if applicable)	
(Date first transacted business in Florida, if prior to registration	ח.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty li 17757 US Hwy 19 N. Suite 275	adiniy i
Clearwater, FL 33764 USA	
(Street Address of Principal Office)	
(Street Address of Principal Office)	
(Street Address of Principal Office)	
(Street Address of Principal Office) 17757 US Hwy 19 N. Suite 275	
(Street Address of Principal Office) 17757 US Hwy 19 N. Suite 275 Clearwater, FL 33764 USA	uthority to manage is/are: Q

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8. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in 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)

L Signature of an authorized person

(In accordance with section 605.0203, F.S., the execution of this document constitutes as 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.)

Claudia Lodetti

Typed or printed name of signee

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:

ENEXIO US, LLC

If unavailable, the alternate to be used in the state of Florida is:

2. The name and the Florida street address of the registered agent and office are:

	· · · · · · · · · · · · · · · · · · ·	(Name)	
	155 Office Plaz	a Dr. Suite A	
Florida Street Address (P.O. Box NOT ACCEPTABLE)			
	Tallahassee	FL 32301	
City/State/Zip			
			ြန္ တို 🏹
liability con registered a	pany at the place designated in gent and agree to act in this cap	I to accept service of process for the ab- this certificate. I hereby accept the app pacity. I further agree to comply with the performance of my duties, and I am fai	pointment as he provisions of all

registered agent and agree to act in this capacity. I further agree to comply with the provisions of a 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 605. Florida Statutes.

Jaclyn Wright, Asst Secretary (Signature)

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

ENEXIO US LLC

Managers

Joe Zwetolitz - 17757 US Hwy 19 N. Suite 275, Clearwater FL 33764 Claudia Lodetti - 17757 US Hwy 19 N. Suite 275, Clearwater FL 33764 Eric Fourier - 17757 US Hwy 19 N. Suite 275, Clearwater FL 33764 Tom Tarnok - 17757 US Hwy 19 N. Suite 275, Clearwater FL 33764





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The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ENEXIO US 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 TWELFTH DAY OF JANUARY, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ENEXIO US LLC" WAS FORMED ON THE THIRD DAY OF DECEMBER, A.D. 2015.

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



Authentication: 201657650 Date: 01-12-16

5897530 8300 SR# 20160172598

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