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## **COVER LETTER**

TO:	Registration Section Division of Corporation	as				
SUBJE	Power Engineers, L	LC				
SODJE	C1,	Name of	Limited Liability C	Company		
					nsact Business in Florida," Certi company to transact business in	
Please r	eturn all correspondence of	oncerning this matter to the	following:			
	David Colomb	)				
	-	N	ame of Person	<u></u>		
	Power Engineers, LLC					
	Firm/Company					
	37 Fox Den Road					
	Address					
	Kingston, MA 02364					
	City/State and Zip Code					
	Dave@PowerEngincersLLC.com					
		E-mail address: (to be use	d for future annual	report not	ification)	
For furt	her information concerning	g this matter, please call:				
	David Colombo		508 at (	612-03	82	
	Name o	of Contact Person	Area Code	Day	time Telephone 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				
Enclose	d is a check for the follow \$125.00 Filing Fee	ring amount:  \$\Bigsim \text{\$\ext{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\ext{\$\text{\$\$\text{\$\text{\$\text{\$\text{\$\text{\$\$\}}}}\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\$\text{\$\$\text{\$\text{\$\text{\$\exititt{\$\text{\$\exititt{\$\text{\$\}}}}}\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\}}}\ext{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\}}}}}\$	□ \$155.00 Filir Certified Copy	ıg Fee &	☐ \$160.00 Filing Fee, Certific of Status & Certified Copy	ate

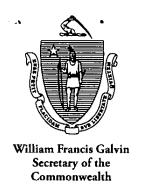
## APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

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: Power Engineers, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") Power Engineers FL, LLC (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C." or "LLC.") Massachusetts (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized) (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability) 37 Fox Den Road, Kingston, MA 02364 (Street Address of Principal Office) same (Mailing Address) 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) David Colombo Name: 2357 Gulf Shore Blvd N Office Address: , Florida 34103 Naples (City) Registered agent's acceptance: 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 application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to complywith the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent. (Registered agent's signature) 8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: David Colombo, Member 37 Fox Den Road, Kingston, MA 02364 9. Attached is a 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. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted) Signature of an authorized person

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. 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.

David Colombo

Typed or printed name of signee



## The Commonwealth of Massachusetts Secretary of the Commonwealth

State House, Boston, Massachusetts 02133

March 1, 2016

### TO WHOM IT MAY CONCERN:

Old May 10 Miles I hereby certify that a certificate of organization of a Limited Liability Company was filed in this office by

#### POWER ENGINEERS, LLC

in accordance with the provisions of Massachusetts General Laws Chapter 156C on December 22, 2004.

I further certify that said Limited Liability Company has filed all annual reports due and paid all fees with respect to such reports; that said Limited Liability Company has not filed a certificate of cancellation or withdrawal; and that said Limited Liability Company is in good standing with this office.

I also certify that the names of all managers listed in the most recent filing are: **DAVID J.** COLOMBO

I further certify, the names of all persons authorized to execute documents filed with this office and listed in the most recent filing are: DAVID J. COLOMBO

The names of all persons authorized to act with respect to real property listed in the most recent filing are: DAVID J. COLOMBO



In testimony of which,

I have hereunto affixed the

Great Seal of the Commonwealth

on the date first above written.

Secretary of the Commonwealth

ellian Travino Galelin