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COVER LETTER

Registration'Section Division of Corporations

SUBJECT:	Avangrid Managem	ent Company, LLC					
SCHOLET	Name of Limited Liability Company						
					ansact Business in Florida," C y company to transact busine		
Please return a	II correspondence o	concerning this matter to th	e following:				
	Susan Johnston						
		1	Name of Person				
	Avangrid Servi	ce Company					
Firm/Company							
	52 Farm View	Drive					
Address							
	New Glouceste	r ME	04260				
City/State and Zip Code							
	susan.johnston@	-					
		E-mail address: (to be us	ed for future annual	report no	tification)		
For further inf	ormation concerning	g this matter, please call:					
Susa	n Johnston		207 at (6 88- 43 _)	44		
	Name o	f Contact Person	Area Code	Day	rtime Telephone Number		
Divis Regis P.O.	LING ADDRESS: ion of Corporations tration Section Box 6327 hassee, FL 32314			Division Registrat Clifton B 2661 Exe	of Corporations of Section Building ecutive Center Circle see, FL 32301		
	theck for the follow 25.00 Filing Fee	ing amount: ■ \$130.00 Filing Fee & Certificate of Status	□ \$155.00 Filir Certified Copy	ig Fee &	☐ \$160.00 Filing Fee, Cer of Status & Certified Copy		

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 COMPANYTO TRANSACT BUSINESS IN THE STATE OF FLORIDA: Avangrid Management Company, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") Avangrid Management Company, 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.") Delware (Jurisdiction under the law of which foreign limited liability (FBI number, if applicable) company is organized) January 1, 2017 (Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability) 52 Farm View Drive New Gloucester ME 04260 (Street Address of Principal Office) 52 Farm View Drive New Gloucester ME 04260 (Mailing Address) 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) NRAI Services, Inc. Name: 1200 South Pine Island Road Office Address: Plantation 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 fegistered 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: Robert D. Kump - President 52 Farm View Drive New Gloucester, ME 04260 R. Scott Mahoney - Vice President - General Counsel and Socretary 52 Farm View Dr. New Gloucester, ME 04260 Scott Tremble - Treasurer and Controller 52 Farm View Drive New Gloucester, ME 04260 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.

Typed or printed name of signee

Scott Tremble - Treasurer and Controller

Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "AVANGRID MANAGEMENT COMPANY, 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 TWENTY-SEVENTH DAY OF OCTOBER, A.D. 2016.

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

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Authentication: 203234378

Date: 10-27-16

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