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Florida Department of State
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To: Division of Corporations
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Foreign Limited Liability Company
POWERGRID SOLUTIONS LLC

FILE SECOND

Certificate of Status	0
Certified Copy	1
Page Count	03
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

*****FILE SECOND - FILE AFTER THE WITHDRAWAL FOR
POWERGRID SOLUTIONS INC.*****

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

IN COMPLIANCE WITH SECTION 605.002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. Powergrid Solutions LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "LLC," or "LLC.")
2. Delaware
(Jurisdiction under the law of which foreign limited liability company is organized)
3. 82-2552223
(FEI number, if applicable)
4. _____
(City in which company has office in Florida; if not in Florida, then the city in which the company has its principal office)
5. 3100 W. 7th Street
(Street Address of Principal Office)
Suite 500
Port Worth TX 76107
6. _____
(Mailing Address)

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: C T Corporation System
Office Address: 1200 South Pine Island Road
Plantation, Florida 33324
(City) (Zip code)

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 by this application, I hereby accept this appointment as registered agent and agree to act in this capacity. I further agree to comply with 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.

By: C T Corporation System

(Registered agent's signature)

Kimberly Baggett
Assistant Secretary

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

Title or Capacity	Name and Address	Title or Capacity	Name and Address
Member	Arbor-Crowley, LLC 3100 W. 7th Street, #500 Fort Worth TX 76107		

(Use attachments if necessary)

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)

10. 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 this Department constitutes a crime of the first degree felony as provided for in s. 817.155, F.S.

Tara D. Mackey
Tara D. Mackey, Secretary

(Typed or printed name of signor)

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "POWERGRID SOLUTIONS 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 ELEVENTH DAY OF SEPTEMBER, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "POWERGRID SOLUTIONS LLC" WAS FORMED ON THE SEVENTEENTH DAY OF AUGUST, A.D. 2017.

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



6514709 8300

SR# 20176104320

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

A handwritten signature in black ink, appearing to read "JBULLOCK", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed in a small font.

Authentication: 203200893

Date: 09-11-17