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(Business Entity Name)	
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Name:	Aireko Energy Solutions US LLC
Document #:	01
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T0: **Registration Section Division of Corporations**

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AIREKO ENERGY SOLUTIONS 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:

	Paula T. Bradl	ey, Paraiegal			
		N	ame of Person		· · · · · · · · · · · · · · · · · · ·
	McCausland K	leen + Buckman			
	<u></u>	Fi	irm/Company		
	80 W. Lancast	er Avenue, 4th Floor			
			Address	·	
	Devon, PA-19	9333			
		City/S	tate and Zip Code	-	·
	mtcarrion@aire	ko.com			
		E-muil address: (to be used	for future annual rep	port not	fication)
For further inform	nation concernit	ng this matter, please call:			
Paula T	. Bradley, Paral	cgal	610 at ()	341-105	52
	Name	of Contact Person	Area Code	Day	lime Telephone Number
Divisio Registra P.O. Bo	NG ADDRESS to of Corporation tion Section x 6327 ssce, FL 32314	-	D Ri Cl 26	ivision o egistrati lifton B 561 Exe	ADDRESS: of Corporations on Section uilding cutive Center Circle ce, FL 32301
Enclosed is a cho	ck for the folioy	ving amount:			,
	.00 Filing Fee	Certificate of Status	S155.00 Filing F Certified Copy	Fee &	□ \$160.00 Filing Fee, Certificate 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. UNITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. AIREKO ENERGY SOLUTIONS US, LLC

(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")		(Name of Foreig	n Limited Linbility	Company; must in	clude "Limited Liability	Company," "L.L	.C., " or "LLC.")
--	--	-----------------	---------------------	------------------	--------------------------	----------------	-------------------

(If name unavailable, onter alternate n	ame adopted for the purpose of transacting business in Flo	rida. The a	Itemate name must include "Limited Liabihty Compa	ury," "I, L C." or "LL(" ")
2 DELAWARE		3.	47-2826327	
	hich foreign limited liability company is organized)		(FEI number, if applic	able)
4				
4	(Date first transacted business in Florida, if prior to (See sections 605 0904 & 605 0905, F.S. to determine	registration	i) lisbility)	~
5 Las Casas Street, Lot 2	20	6.	P.O. Box 2128	IF 201
(Street Address of I			(Mailing Address)	1. 8
Bairoa Industrial Park			San Juan, PR 00922-2128	
Caguas, PR 00725				
······································				
7. Name and street addres	s of Florida registered agent: (P.O. Box	NOT	acceptable)	Fig 3
Name:	CT Corporation System			FL'ST D.
	1200 South Pine Island Road			
Office Address:	1200 Bouilt I inc Island Koud		-	0
	Plantation		, Florida <u>33324</u>	
	(City)		(Zip code)	
Registered agent's accep	tance:			

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 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. Judith Argao

Acquistered agent's signature) Vice President and 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:
Manager	Francisco Uriante P.O. Box 2128 San Juan, PR 00725	Manager	Hector Rivera P.O. Box 2128 San Juan, PR 00725
Manager	Waldemar Toro P.O. Box 2128 San Juan, PR 00725		

(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. 1 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.

	Signature of an authorized person	<u> </u>
Waldemar Toro		
	Typed or oranted name of signes	

Delaware

The First State

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

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

> FILED 2011 DEC 12 AMID: 19 211 DEC 12 AMID: 19 21 CHETARY OF STATE

Page 1



Jeffrey W. Bullech, Secretary of State

Authentication: 203728369

Date: 12-11-17

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