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COVER LETTER

TO:

TO:	Registration Section Division of Corporations
SUBJI	Emera Technologies, LLC
.1 (/ 174)	T:
	sed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate c, and check are submitted to register the above referenced foreign limited liability company to transact business in Florid
Please	urn all correspondence concerning this matter to the following:
	David M. Nicholson
	Name of Person
	TECO Services, Inc.
	Firm/Company
	702 N. Franklin Street, P-3
	Address
	Tampa, Florida 33602
	City/State and Zip Code
	hdouglasta tecoenergy.com
	E-mail address: (to be used for future annual report notification)
For fu	er information concerning this matter, please call:
	Barbara Taulton 813 228-1806 at ()
	Name of Contact Person Area Code Daytime Telephone Number
	MAILING ADDRESS: Division of Corporations Division of Corporations Registration Section P.O. Box 6327 Fallahassee, F1, 32314 Clifton Building Tallahassee, F1, 32301
Enclos	is a check for the following amount: State of Status St

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

IN COMPILANCE 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:

name unavailable, enter alternate	name adopted for the purpose of transacting business in Ho	rida, The altern	ate name must include "Limited Liabi	lity Company," "L.L.C," or "ELC")
DELAWARE		3, 83	2-4012766	
Chirisdiction under the law of v	high foreign limited liability company is organized)		(FLI numbe	r, if applicable)
	(Date first transacted business in Florida, if prior to (See sections 605 0904 & 605,0905, F.S. to determ		lity)	
702 N. FRANKLIN S		6. ⁷⁰	O2 N. FRANKLIN STREE	ET. P-3
(Street Address of TAMPA, FLORIDA 3	•		Mailing Addre 1202 AMPA, FLORIDA	(55)
- TANTA TECKIDA		-17	AND AND AND A SHOP	
Name and street addre	ss of Florida registered agent: (P.O. Box	NOT acce	eptable)	
Name:	DAVID M. NICHOLSON			
Office Address:	702 N. FRANKLIN STREET, P-3			
	702 N. FRANKLIN STREET, P-3 TAMPA			#F 81
Office Address: egistered agent's acceptiving been named as resignated in this applications of the provise comply with the provise.	TAMPA (City) Otance: egistered agent and to accept service of partition, I hereby accept the appointment a lions of all statutes relative to the proper	s registerea	d agent and agree to act i	liability company at the plon this capacing I further a
Office Address: Pgistered agent's acceptiving been named as resignated in this applications of the provise comply with the provise.	TAMPA (City) Otance: egistered agent and to accept service of partion, I hereby accept the appointment a cions of all statutes relative to the properties of my position as registered agent.	s registered and comp	(/ipcode the above stated limited i d agent and agree to act i	liabilly company at the pl n this capacity I further o
Office Address: egistered agent's acceptiving been named as resignated in this application of the provisid accept the obligation	TAMPA (City) Otance: egistered agent and to accept service of partion, I hereby accept the appointment actions of all statutes relative to the properties of my position as registered agent. (Registered agent's	s registered and comp (Signature)	(Zipeode the above stated limited d agent and agree to act i lete performance of my d	liabiller company at the plon this capacited I further a laties, and I am famillar w
Office Address: egistered agent's acceptiving been named as resignated in this application of the obligation. The name, title or cap	TAMPA (City) Otance: egistered agent and to accept service of partion, I hereby accept the appointment actions of all statutes relative to the properties of my position as registered agent. (Registered agent's acity and address of the person(s) who have	s registered and composition of the signature)	the above stated limited and agent and agree to act is lette performance of my definition.	liabiling company at the plon this capacity. I further a luties, and I am fumillar w
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Office Address: egistered agent's acceptiving been named as risignated in this application accept the obligation. The name, title or captitle or Capacity: Secretary Jse attachments if necessary	TAMPA (City) Diance: egistered agent and to accept service of attion, I hereby accept the appointment actions of all statutes relative to the property of my position as registered agent. (Registered agent) (All DAVID E. SCHWARTZ) (All DAVID E. SCHWAR	s registered and compositions (and compositions) is/have authorized authorized duly authorized auth	the above stated limited and agent and agree to act in lete performance of my defends to manage is/are; or Capacity:	Name and Address:

Typed or printed name of signee

DAVID E. SCHWARTZ



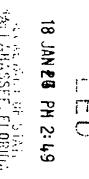
I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "EMERA TECHNOLOGIES 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-SECOND DAY OF JANUARY, A.D. 2018.





Authentication: 202012830

Date: 01-22-18