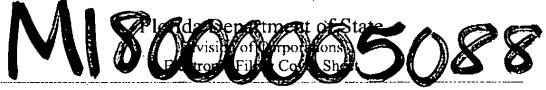
5/29/2018

Division of Corporations



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| To: | | 2.5 |
| | Division of Corporations | |
| | Fax Number : (850)617-6383 | SSA & |
| From: | | 711. Zan |
| | Account Name : C T CORPORATION SYSTEM | <u> </u> |
| | Account Number : FCA000000023 | මුදි. උ |
| | Phone : (514)280-3338 | 242,34 |
| | Fax Number : (954)208-0845 | <u>5</u> , 2 |

Enter the email address for this business≔entity to be used for future annual report mailings. Enter only one:@mail address please.

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Foreign Limited Liability Company GE LIGHTING SYSTEMS, LLC

| Certificate of Status | 0 |
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| Certified Copy | 0 |
| Page Count | 03 |
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Corporate Filing Menu



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AFFERCATION DE FOREIGN ENVILLED EIABIELLE COMPANT FOR ÀUTHORIZATION IU 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:

1. GE LIGHTING SYSTEMS, LLC

| 8. The name, title or capacity and address of the person(s) who has/have authority to mapage is/arc. Title or Canacity: Mane and Address: Matthew McAllister 1975 Noble Rd. East Cleveland, OH 44112 (Use attachments if necessary) 9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having jurisdiction under the law of which it is organized. (If the certificate is in a foreign inguage, a translation of the translator must be submitted) 10. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware the submitted in a document to the Department of State constitutes a third degree felony as provided for in s.81 | | | | |
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| (Due find manuscred budges to Florida, (Prior to registration) (Stress Address of Principal Office) (Stress Address of Principal Office) East Flat Rock, NC 28726 (Stress Address of Florida registered agent: (P.O. Box NOT acceptable) Name: CT Corporation System Office Address: 1200 South Plate Island Road Plantation (City) (City) (City) (Registered agent's acceptance: Having been manuel as registered agent and to accept service of process for the above stated limited floridational accept the appointment agregistered agent and accept the appointment agregistered agent and accept the appointment agregistered agent and accept the abbligations of all statutes relative to the propagatal complete information of my position as registered agent. By: CT Corporation System (Registered agent) (Registered agent) (Registered agent) (Registered agent) (Registered agent and address of the person(s) who has/have authority to mapage is/are: (Registered agent) (Registered agent) (Registered agent) (Registered agent and address of the person(s) who has/have authority to mapage is/are: (Registered agent) (Registered agent) (Registered agent) (Registered agent) (Registered agent and address of the person(s) who has/have authority to mapage is/are: (Registered agent) (Registered agent) (Registered agent) (Registered agent and address of the person(s) who has/have authority to mapage is/are: (Registered agent) (Registered agent) (Registered agent) (Registered agent) (Registered agent and to accept agent and address of the person(s) who has/have authority to mapage is/are: (Registered agent) (Registered agent | | | 3. 56-2004988 | |
| Discretions 603,0004 & 603,0003, F.S. to determine prestly lichility) 3010 Spartanburg Highway (Sirest Address of Principal Office) (Mailing Address) (Mailing Address) East Flat Rock, NC 28726 Cincinnati, OH 45202 Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: CT Corporation System | (Junidiction ander the law | of which foreign limited liability company is organized) | (FEI muntier, if applied | ipte) |
| (Sireu Address of Florida registered agent: (P.O. Box NOT acceptable) Name: CT Corporation System Office Address: 1200 South Pine Island Road Plantation , Florida 33324 (City) Registered agent's acceptance: (City) Registered agent's acceptance Registered agent's acceptance Registere | Upon Qualification | | | |
| (Sireu Address of Florida registered agent: (P.O. Box NOT acceptable) Name: CT Corporation System Office Address: 1200 South Pine Island Road Plantation , Florida 33324 (City) Registered agent's acceptance: (City) Registered agent as registered agent and to accept service of process for the above stated limited like segment this application, I hereby accept the appointment agreet steep agent and agree to act in the comply with the provisions of all statutes relative to the proper and complyte for for innunce of my dutted accept the obligations of my position as registered agent. By: CT Corporation System (Style Provision System) (Style Provision Syste | · · · · · · · · · · · · · · · · · · · | (Date first transacted basiness in Florids, if prior to re (See sections 605,0904 & 605,0905, F.S. to determine | gfatration) a penalty liability) | |
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| Name: Office Address: 1200 South Pine Island Road Plantation Plantation (City) (| Name and street add | fress of Florida registered agent: (P.O. Box | NOT acceptable) | |
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| | | Signature | I an Muthrended person, | |
| Elizabeth Glotfelty | | Elizabeth Glotfelty | | |

Delaware

Page 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "GE LIGHTING SYSTEMS, 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 MAY, A.D. 2018.

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

2683369 8300

SR# 20184098022

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

Authentication: 202740491

Date: 05-22-18