## M | 800000636/

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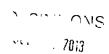


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87/10/18--01024--801 \*\*28.00







June 20, 2018

AIMEE HARRISON 4 HIGH RIDGE PARK, STE 202 STAMFORD, CT 06905

SUBJECT: RESOURCE ENERGY SYSTEMS, LLC

Ref. Number: W18000057602

We have received your document for RESOURCE ENERGY SYSTEMS, LLC and your check(s) totaling \$100.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

There is a balance due of \$25.00.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Octavia L Simmons Regulatory Specialist III

Letter Number: 718A00012885

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Check and documents anchored. Please process.

Thank you.

Aimee Harriso 7/3/18

## COVER LETTER

то:	Registration Section Division of Corporations
SUBJE	RESOURCE ENERGY SYSTEMS, LLC
50202	Name of Limited Liability Company
The end Existen	closed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of ce, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.
Please	eturn all correspondence concerning this matter to the following:
	AIMEE HARRISON
	Name of Person
	RESOURCE ENERGY SYSTEMS, LLC
	Firm/Company
	4 HIGH RIDGE PARK, SUITE 202
	Address
	STAMFORD, CT 06905
	City/State and Zip Code
	rbreen@resglobal.com
	E-mail address: (to be used for future annual report notification)
For furt	ner information concerning this matter, please call:
	AIMEE HARRISON 203 738-5901
	Name of Contact Person Area Code Daytime Telephone Number
	MAILING ADDRESS:STREET ADDRESS:Division of CorporationsDivision of CorporationsRegistration SectionRegistration SectionP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301
Enclosed	I is a check for the following amount:  \$125.00 Filing Fee

## 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 COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

(Name of Fe	oreign Limit	ed Etability Company; must include "Lin	nited Liability Company," "L.E.C.," or "LLC."	")
(If name unavailable, enter alto	mate name ad	lopted for the purpose of transacting business in	Florida. The alternate name must include "Limited Li	ability Company," "L.L.C," or "LLC.")
2. DELAWARE			3. 20-8603536	
(Jurisdiction under the la	w of which for	reign limited liability company is organized)	(FEI min	sber, if applicable)
4				•
	(	Date first transacted business in Florida, if prior See sections 605,0904 & 605,0905, F.S. to deter	to registration.) mine penalty liability)	1:5
5. 4 HIGH RIDGE I			6. 4 HIGH RIDGE PARK	_ FS = T
(Street Addr SUITE 202	ss of Principa	l Office)	Mailing Add	drass)
STAMFORD, CT 06905			STAMFORD, CT 06905	m-6 200
0771111 07177 CT		<del></del>	317(m) QKD, C1 00505	F 9 0
7. Name and street ac		Florida registered agent: (P.O. Bo	ox <u>NOT</u> acceptable)	FLORITE S
Name:	<u>C T</u>	CORPORATION SYSTEM		≥ v
Office Addre	ss: 120	0 SOUTH PINE ISLAND ROAD	)	
	PI /	ANTATION	33324	
(City)			, Florida 33324 (Zip coc	<del></del> k)
to comply with the pr	ovisions o tions of m	f all statutes relative to the prope y position as registered agent.	as registered agent and agree to act or and complete performance of my	in this capacity. I further agre duties, and I am familiar with
to comply with the pr	ovisions o tions of m	f all statutes relative to the prope y position as registered agent.	er and complete performance of my	in this capacity. I further agreduties, and I am familiar with
to comply with the pr and accept the obliga	ovisions of m	fall statutes relative to the property position as registered agent.  Shimy Mr. Ginne (Registered agent)	S. Asst. Scinelyng signature) Shelly Michinaes	in this capacity. I further agre duties, and I am familiar with
to comply with the pr and accept the obliga	ovisions of m	If all statutes relative to the property position as registered agent.    Company   Co	S Asst. Schelly McGi noes as/have authority to manage is/are:	duties, and I am familiar with
to comply with the prand accept the obliga  8. The name, title or Title or Capacity	ovisions of m	If all statutes relative to the property position as registered agent.  (Registered agent)  and address of the person(s) who have and Address:	S. ASST. SCILLING.  signature) Shelly M.G. noes  nas/have authority to manage is/are:  Title or Capacity:	duties, and I am familiar with  Name and Address:
to comply with the prant accept the obligated accept the obligated.  8. The name, title or	ovisions of m	If all statutes relative to the property position as registered agent.    Company   Company   Charles   Ch	S Asst. Schelly McGi noes as/have authority to manage is/are:	Name and Address:  SCOTT REINSTEIN 4 HIGH RIDGE PARK
to comply with the prand accept the obliga  8. The name, title or Title or Capacity	ovisions of m	If all statutes relative to the property position as registered agent.  (Registered agent)  and address of the person(s) who have and Address:  STEVEN SCHLUSSEL	S. ASST. SCILLING.  signature) Shelly M.G. noes  nas/have authority to manage is/are:  Title or Capacity:	Name and Address: SCOTT REINSTEIN
to comply with the prant accept the obligated accept the obligated.  8. The name, title or Title or Capacity	ovisions of m	If all statutes relative to the property position as registered agent.    Company   Company   Charles   Ch	S. ASST. SCILLING.  signature) Shelly M.G. noes  nas/have authority to manage is/are:  Title or Capacity:	Name and Address:  SCOTT REINSTEIN 4 HIGH RIDGE PARK
8. The name, title or Title or Capacity PRESIDENT	ovisions of m	If all statutes relative to the property position as registered agent.    Company   Co	S. ASST. SCILLING.  signature) Shelly M.G. noes  nas/have authority to manage is/are:  Title or Capacity:	Name and Address:  SCOTT REINSTEIN 4 HIGH RIDGE PARK
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8. The name, title or Title or Capacity PRESIDENT  EXEC VP, CFO,	capacity a	If all statutes relative to the property position as registered agent.    Company   Co	S. ASST. SCILLING.  signature) Shelly M.G. noes  nas/have authority to manage is/are:  Title or Capacity:	Name and Address:  SCOTT REINSTEIN 4 HIGH RIDGE PARK
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8. The name, title or Title or Capacity PRESIDENT  EXEC VP, CFO,  (Use attachments if no processed in the control of the translator must be co	capacity a capacity a capacity a capacity a cate of exi aw of whi aw of white cate of the D	and address of the person(s) who have and Address:  STEVEN SCHLUSSEL  4 HIGH RIDGE PARK STAMFORD, CT 0695  RICHARD PLUTZER  4 HIGH RIDGE PARK STAMFORD, CT 06905  stence, no more than 90 days old, ch it is organized. (If the certificated)  accordance with section 605.020  repartment of State constitutes a the section of the person of the	duly authenticated by the official hate is in a foreign language, a translation of the content o	Name and Address:  SCOTT REINSTEIN  4 HIGH RIDGE PARK STAMFORD, CT 06905  ving custody of records in the on of the certificate under oath



I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "RESOURCE ENERGY 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 SEVENTH DAY OF JUNE, A.D. 2018.

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

Authentication: 202840708

Date: 06-07-18