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| (Requestor's Name)      |                   |             |  |  |  |
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| (Cit                    | y/State/Zip/Phone | e #)        |  |  |  |
| PICK-UP                 | ☐ WAIT            | MAIL        |  |  |  |
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| (Bu                     | siness Entity Nan | ne)         |  |  |  |
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| (Do                     | cument Number)    |             |  |  |  |
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| Certified Copies        | _ Certificates    | s of Status |  |  |  |
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| Special Instructions to | Filing Officer:   |             |  |  |  |
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SECRETARY OF STATE

M callace

Geoffrey A. Krenkel 41 Samantha Drive Morganville, NJ 07751

01/09/2019

Dear Sir or Madam,

I am enclosing application to register Real Power Engineers, LLC as a foreign limited liability company in the State of Florida as required by the Florida Department of State Division of Corporations.

Also included is a certificate of good standing for Real Power Engineers from the state of its formation New Jersey and a check for processing the application.

Sincerely,

Geoffrey A. Krenkel, PE

| TO: | Registration Section     |
|-----|--------------------------|
|     | Division of Corporations |

Real Power Engineers, LLC

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 o

| lease return all correspondence concerning this matter to the following: |      |  |  |  |  |
|--|------|--|--|--|--|
| Geoffrey A. Krenkel  |      |  |  |  |  |
| Name of Person   |      |  |  |  |  |
| Real Power Engineers, LLC  |      |  |  |  |  |
| Firm/Company   |      |  |  |  |  |
| 41 Samantha Drive  |      |  |  |  |  |
| Address  |      |  |  |  |  |
| Morganville, NJ  |      |  |  |  |  |
| City/State and Zip Code  |      |  |  |  |  |
| gkrenkel@realpowerengineers.com  |      |  |  |  |  |
| E-mail address: (to be used for future annual report notification)       |      |  |  |  |  |
| or further information concerning this matter, please call:              |      |  |  |  |  |
| Geoffrey Krenkel <sub>at (</sub> 732 ) 591-1730                          |      |  |  |  |  |
| Name of Contact Person Area Code Daytime Telephone Number                | ar . |  |  |  |  |

#### MAILING ADDRESS:

Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314

### **STREET ADDRESS:**

**Division of Corporations** Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Enclosed is a check for the following amount:

☑ \$125.00 Filing Fee

□ \$130.00 Filing Fee & Certificate of Status

□ \$155.00 Filing Fee & Certified Copy

□ \$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. LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

| 1. Real Power Engines (Name of Foreign   | ers, LLC<br>Limited Liability Company; must include "Limited  | J Liability Company, ""L.L.C.," or "Ll.C             | .")                                    |
|--|---|--|--|
| (If name unavailable, enter alternate n  | ame adopted for the purpose of transacting business in Flor   | nda. The alternate name must include "Limited I      | iability Company," "L.L.C," or "LLC,") |
| n New Jersey   |   | <sub>3.</sub> 51-0650850                             |  |
| (Jurisdiction under the law of which foreign limited liability company is organized) |   |  | imber, if applicable)                  |
| 4.   |   |  |  |
|  | (Date first transacted business in Florida, if prior to a<br>(See sections 605 0904 & 605 0905, F.S. to determine   |  |  |
| 5. 704 Ginesi Drive (Street Address of Principal Office) Suite #11F                  |   | 6. 41 Samantha Drive                                 |  |
|  |   | (Mailing Address) Morganville, NJ 07751              |  |
| Morganville, NJ 077  | 51  | Worganville, NS 0775                                 |  |
| <ol> <li>Name and <u>street addres</u></li> <li>Name:</li> </ol>                     | is of Florida registered agent: (P.O. Box<br>Registered Agents Inc.   | NOT acceptable)                                      |  |
|  | 7901 4th St N STE 300   |  |  |
| Office Address:  |   | <u>-</u>   |  |
|  | St. Petersburg  | Florida 33702  |  |
|  | ions of all statutes relative to the proper s of my position as registered agent.  But here Bill Havre/Assistant Se | ecretary/Registered Agents Inc.                      |  |
|  | (Registered agent's s   | ignature)  |  |
| 8. The name, title or capa <u>Title or Capacity:</u>                                 | acity and address of the person(s) who ha  Name and Address:  | s/have authority to manage is/are Title or Capacity: | :<br><u>Name and Address:</u>          |
| Owner  | Geoffrey Krenkel  |  | <u> </u>                               |
|  | 41 Samantha Drive   | -  |  |
|  | Morganville, NJ 07751   | -  |  |
|  |   | <u> </u>   |  |
| (Use attachments if neces:   | sary)   |  |  |
|  | of existence, no more than 90 days old, of  | duhi authantiantad haitha afficial                   | handan anasada - Caranada in M         |
| jurisdiction under the law of the translator must be su                              | of which it is organized. (If the certificate   | e is in a foreign language, a transl                 | ation of the certificate under oath    |
|  | uted in accordance with section 605.0203<br>the Department of State constitutes a hi                                |  |  |
|  | Surnature   | of an authorized person                              | <del></del>                            |
|  | Geoffrey A. Krenkel   |  |  |

Typed or printed name of signee

# STATE OF NEW JERSEY DEPARTMENT OF THE TREASURY DIVISION OF REVENUE AND ENTERPRISE SERVICES SHORT FORM STANDING

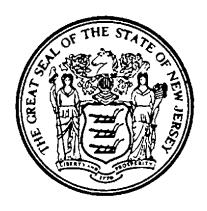
#### REAL POWER ENGINEERS, LLC 0600309925

I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic Limited Liability Company was registered by this office on September 26, 2007.

As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.

I further certify that the registered agent and office are:

GEOFF KRENKEL P.E. 41 SAMANTHA DR MORGANVILLE, NJ 07751



IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my Official Seal at Trenton, this 9th day of January, 2019

Elizabeth Maher Muoio State Treasurer

Sluss of Mun

Certificate Number : 6094115801

Verify this certificate online at

https://www1.state.nj.us/TYTR\_StandingCert/JSP/Verity\_Cert\_jsp