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(((H19000081983 3)))



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## Foreign Limited Liability Company TFS ENERGY, LLC

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Help

From:



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 12, 2019

COGENCY GLOBAL, INC.

SUBJECT: TFS ENERGY, LLC

REF: W19000023661

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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Karen A Saly Regulatory Specialist II FAX Aud. #: H19000081983 Letter Number: 119A00004925

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

(Nema of Local	TFS ENER	RGY LLC	
(Mante Or Fore)	gn Limited Liability Company; must include "Limite	Ed Liability Company," "L.L.C.," or "LLC.")	
navailable, enter alternat	te name adopted for the perpose of transaction business in Fig.	rida. The alternate name must include "Limited Liability Company," "L L.C.; or "LLC.	
DE		3. <u>22-3743471</u>	
idiction under the law of	which foreign limited liability company is organized)	(restaunces, it apparatue) -	
3/11/2019		- 1	
	(Date first transacted business in Florida, if prior to (See sections 605.0904 & 605.0905, F.S. to determine	Tegishration.)	
West Broad Street, 9th Floor		6. 9 West Broad Street, 9th Floor	
Stamford, CT 06902		Stamford, CT 06902	
and street addre	ss of Florida registered agent: (P.O. Box	NOT acceptable)	
Name:	COGENCY GLOBA	LINC.	
	COGENCY GLOBA  115 North Calhoun St.		
	115 North Calhoun St.		
Office Address: ed agent's accepteen named as real in this applicate with the provisi	Tallahassee  (Chy)  tance: gistered agent and to accept service of profiler, I hereby accept the appointment as t	Suite 4	

From:

Title or Capacity;  ⊠Manager	Name and Address:  Alan Kurzer	Title or Capacity:   Manager	Name and Address: Name: Larry Rosenshein
Member	Address: 9 West Broad Street, 9th Floor	Member	Address: 9 West Broad Street, 9th Floor
Authorized	Stamford, CT 06902	Authorized	Stamford, CT 06902
Person		Person	. ??
Other		Other	Other
			•
Menager	Name:	Manager	Name:
Member	Address:	Member	Address:
☐Authorized		Authorized	
Person		Person	· · · · · · · · · · · · · · · · · · ·
Other	Other	Other	Other_
Manager	Name:	Manager	Name:
Member	Address:		Address:
Authorized		Authorized	
Person		Person	
Other	Other	Other	
9. Attached is a certification under the lofthe translator must be 10. This document is e	an attachment to report more than six (6). The ay be added to the index when filing your Flor cate of existence, no more than 90 days old, duraw of which it is organized. (If the certificate is submitted)  executed in accordance with section 605.0203 (at to the Department of State constitutes a third	ida Department of State A  ily authenticated by the of is in a foreign language, a  1) (b), Florida Statutes, I i	Sinnual Report form.  Ticial having custody of records in the translation of the certificate under oath arm aware that any false information

Typed or printed name of signor

## Delaware The First State

Page 1

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

DELAWARE, DO HEREBY CERTIFY "TFS ENERGY, 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 FIFTH DAY OF FEBRUARY, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "TFS ENERGY, LLC" WAS FORMED ON THE TWENTY-FOURTH DAY OF JULY, A.D. 2000.

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

Authentication: 202206065

Date: 02-05-19

3264223 8300 SR# 20190752877

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