

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

IN COMPLIANCE WITH SECTION 603.0802, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

Scana Energy Marketing, LLC ۱.

(Same of Foreign Limited Liability Company; must include "Limited Liability Company," "L L.C.," or "LI.C.")

South Carolina		57-085097			
2(Jurisdiction woder die his of wh	ich kireign linited lishility company is mutaired)	3	(Ff:) member, if apple	icalife}	
December 4, 2019					
1	(Date first managered business in Florida, if prov to re (See sections 605 0904 & 605,0905, F.S. to determine	gistration) c penalty (selainty)			
6100 Emerald Parkway	y, Dublin OH 43016		. (Mailug Address)		
S (Street Address of F	Yuncipal Office)	·	(Mailing Address)		
Dublin OH 43016			• • •		~3
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			······	<u>; </u>	
. Name and street addres	ss of Florida registered agent: (P.O. Box	NOT acceptable)			82
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Name:	C T Corporation System			7.7	$\overline{i\gamma}$
Nalie.	1200 South Pine Island Road			1994 - 1	5 CI
Office Address:					
	Planation	ei	33324		
	(Ctt)	<u> </u>	(Zip code)		

Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated limited Hability company at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered ugent.

m James M. Halpin () d agent's signature) Assistant Secretary

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8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

Title or Capacity:	Name and Address:	Title or Capacity:	Name and	Address	<u>:</u>	
Manager	Scott White Name:	🔲 Manager	Douglas Austin Name: 6100 Emerald Parkway Address: Dublin OH 43016			
Member	6100 Emerald Parkway Address:	Member				
Authorized	Dublin OH 43016					
Person		Person				
President/	CEO Other	Executive Other	VP Other			
Manager	Catharine Conner Name:	🗌 Manager	Amy Gilmore			
Member	6100 Emerald Parkway Address:	Member	Address: Dublin OH 43016			
Authorized	Dublin OH 43016					
Person		Person				
Secretary	Treasurer	CFO	_		1	
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Manager	Name:	🗌 Manager	Name:	· · · · ·	P	1 1
Member	Address:	Member	Address:		P11122-55	
Authorized		Authorized		- 1 **	-01 -02 	
Person		Person		<u> </u>		
Other	Other	Other	Other			

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Nonindexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is ln a foreign language, a translation of the certificate under oath of the translator must be submitted)

10. This document is executed in accordance with section 605.0203 (1) (b), Florida Statines. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Al	
 Signature of an authorized person	
 Amy Calmore	
 7 Typed or printed name of signee	

