

5/27/2020

Division of Corporations

H20000158079 3

M2000004795

Florida Department of State

Division of Corporations

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H20000158079 3)))



H200001580793ABC%

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : CORPORATION SERVICE COMPANY
Account Number : I20000000195
Phone : (850)521-0821
Fax Number : (850)558-1515

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

RECEIVED

2020 MAY 27 PM 1:43

**Foreign Limited Liability Company
SUNNOVA SAP IV, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$125.00

2020 MAY 27 A 9:48

FILED

[Electronic Filing Menu](#)[Corporate Filing Menu](#)[Help](#)

2020 MAY 27

02 02 2020

H20000158079 3

H20000156079 3

COVER LETTER

TO: Registration Section
Division of Corporations

SUNNOVA SAPIV, LLC
SUBJECT: _____

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 correspondence concerning this matter to the following.

Tim Mathis

Name of Person

SUNNOVA SAPIV, LLC

Firm/Company

20 Greenway Plaza Ste 475

Address

Houston, TX 77046

City/State and Zip Code

tax@sunnova.com

E-mail address. (to be used for future annual report notification)

For further information concerning this matter, please call.

Tim Mathis

281

985-9900

at (_____) _____

Name of Contact Person_____
Area Code_____
Daytime Telephone Number**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

H20000156079 3

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. SUNNOVA SAP IV, LLC

(Name of Foreign Limited Liability Company, must include "Limited Liability Company," "L.L.C.," or "LLC")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C.," or "LLC")

2. Delaware

(Jurisdiction under the law of which foreign limited liability company is organized)

3. 84-2184242

(FEI number, if applicable)

4. _____

(Date first transacted business in Florida, if prior to registration.
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 20 Greenway Plaza Ste 475

(Street Address of Principal Office)

Houston, TX 77046

6. 20 Greenway Plaza Ste 475

(Mailing Address)

Houston, TX 77046

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Corporation Service Company

Office Address: 1201 Hays Street

Tallahassee, Florida 32301

(City)

(Zip code)

Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated limited liability 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 agent.

By: Corporation Service Company

(Registered agent's signature)

Amanda Robinson, Asst. ~~Vice~~ President

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are.

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
<u>Authorized Person</u>	<u>William J. Berger</u> <u>20 Greenway Plaza Ste 475</u> <u>Houston, TX 77046</u>	<u>Authorized Person</u>	<u>Robert Lane</u> <u>20 Greenway Plaza Ste 475</u> <u>Houston, TX 77046</u>
<u>Authorized Person</u>	<u>Walter A. Baker</u> <u>20 Greenway Plaza Ste 475</u> <u>Houston, TX 77046</u>	<u>Authorized Person</u>	<u>Tim Mathis</u> <u>20 Greenway Plaza Ste 475</u> <u>Houston, TX 77046</u>

(Use attachments if necessary)

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 in 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 Statutes. 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.

Timothy D. Mathis

Digitally signed by Timothy D. Mathis
Date: 2020.05.08 14:50:52 -05'00'

Signature of an authorized person

Tim Mathis

Typed or printed name of signer

H20000156079 3

Delaware

Page 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SUNNOVA SAP IV, 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. 2020.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SUNNOVA SAP IV, LLC" WAS FORMED ON THE TWENTY-FIRST DAY OF JUNE, A.D. 2019.

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



7479456 8300

SR# 20204460867

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

A handwritten signature in black ink, appearing to read "JBULLOCK", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed in a small font.

Authentication: 202979178

Date: 05-22-20

H20000156079 3