

M210000006020

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

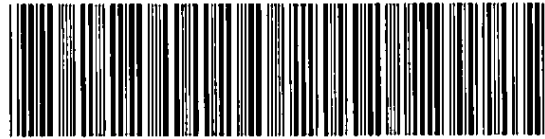
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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RECEIVED
2021 MAY 17 PM 2:36
TALLAHASSEE, FLORIDA

APPROVED
AND
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2021 MAY 17 PM 1:23
TALLAHASSEE, FLORIDA

MAY 18 2021

K. Brumley

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE: 815045 7675178

AUTHORIZATION

COST LIMIT : \$ 155.00

ORDER DATE : May 14, 2021

ORDER TIME : 5:10 PM

ORDER NO. : 815045-005

CUSTOMER NO: 7675178

FOREIGN FILINGS

NAME: SIMS ENERGY USA LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY
 PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Eyliena Baker -- EXT# 61594

EXAMINER: _____

COVER LETTER

**TO: Registration Section
Division of Corporations**

SIMS ENERGY USA 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 correspondence concerning this matter to the following:

Marek Lucianek

Name of Person

Sims Limited

Firm/Company

200 W MADISON STREET, SUITE # 3950

Address

CHICAGO, IL 60606

City/State and Zip Code

marcy.lucianek@simsmm.com

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

For further information concerning this matter, please call:

MARCY LUCIANEK

312

402-1361

at ()

Name of Contact Person

Area Code

Daytime Telephone Number

Mailing Address:

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

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

☐ \$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. SIMS ENERGY USA 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 3. 86-3069788
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

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

5. <u>Sims Limited</u> (Street Address of Principal Office)	6. <u>Sims Limited</u> (Mailing Address)
<u>200 W MADISON STREET, SUITE # 3950</u>	<u>200 W MADISON STREET, STREET # 3950</u>
<u>CHICAGO, IL 60606</u>	<u>CHICAGO, IL 60606</u>

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

Name: CORPORATION SERVICE COMPANY

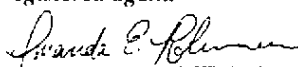
Office Address: 1201 Hays Street

Tallahassee, Florida 32301
(City) (Zip code)

APPROVED
AND
FILED
2021 MAY 17 PM 1:25

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.



(Registered agent's signature)

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:**

☐ Manager Name: CYNTHIA TAIT

☐ Member Address: 200 W MADISON STREET

☒ Authorized SUITE # 3950, CHICAGO, IL 60606

Person _____

☐ Other _____ ☐ Other _____

☐ Manager Name: Scott Miller

☐ Member Address: 200 W MADISON STREET

☒ Authorized SUITE # 3950, CHICAGO, IL 60606

Person _____

☐ Other _____ ☐ Other _____

☐ Manager Name: _____

☐ Member Address: _____

☐ Authorized _____

Person _____

☐ Other _____ ☐ Other _____

Title or Capacity: **Name and Address:**

☐ Manager Name: Brent Stewart

☐ Member Address: 200 W MADISON STREET

☒ Authorized SUITE # 3950, CHICAGO, IL 60606

Person _____

☐ Other _____ ☐ Other _____

☐ Manager Name: _____

☐ Member Address: _____

☐ Authorized _____

Person _____

☐ Other _____ ☐ Other _____

☐ Manager Name: _____

☐ Member Address: _____

☐ Authorized _____

Person _____

☐ Other _____ ☐ Other _____

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed 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 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.

Cynthia Tait
Signature of an authorized person

CYNTHIA TAIT

Typed or printed name of signee

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SIMS ENERGY USA 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 FOURTEENTH DAY OF MAY, A.D. 2021.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SIMS ENERGY USA LLC" WAS FORMED ON THE TWENTY-NINTH DAY OF MARCH, A.D. 2021.

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


Jeffrey W. Bullock, Secretary of State

5711216 8300

SR# 20211798839

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

Authentication: 203211454

Date: 05-14-21