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(Requestor's Name)				
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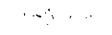
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COVER LETTER

TO:	Registration Section Division of Corpora			
SUBJI	ECT: Jupite	Jupiter Renewables, LLC		
		Name of Limited Liability Company		
The en Exister	closed "Application by nce, and check are subm	Foreign Limited Liability (nitted to register the above to	Company for Authorization to Transact Business in Florida," Certificate o referenced foreign limited liability company to transact business in Florida	
Picasc	return all corresponden	ce concerning this matter to	o the following:	
		David Freund		
		Name of Person		
		Jupite	r Renewables, LLC	
Firm/Company			Firm/Company	
		11961 Northwest 11th Court		
	Address		Address	
Coral Springs Florida 33071			al Springs Florida 33071	
		ity/State and Zip Code)@JUPITERRENEWABLES.COM		
		E-mail address: (to be	used for future annual report notification)	
For fur	ther information concer-	ning this matter, please cal	l:	
	DAVID FREUN	D	914 582-9551	
	Nam	e of Contact Person	Area Code Daytime Telephone Number	
	Mailing Address: Registration Section	on	Street Address: Registration Section	
	Division of Corpo	rations	Division of Corporations	
	P.O. Box 6327		The Centre of Tallahassee	
	Tallahassee, FL 32	2314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	
	Enclosed is a check for Please make check now	or the following amount: yable to: FLORIDA DEP		
	□ \$125.00 Filing Fee		& 🗆 \$155.00 Filing Fee & 😾 \$160.00 Filing Fee, Certificate	





July 7, 2021

DAVID FREUND 11961 NW 11 CT CORAL SPRINGS, FL 33071

SUBJECT: JUPITER RENEWABLES, LLC

Ref. Number: W21000096825

We have received your document for JUPITER RENEWABLES, LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Letter Number: 921A00015420

Tracy L Lemieux Regulatory Specialist II

www.sunbiz.org

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

IN COMPLIANCE WITH SECTION 605.0002, PLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED HABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: JUPITER RENEWABLES, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") (If mime unavailable, enter alternate name adopted for the purpose of transacting bossess in Florida. The alternate name must include "Limited Liability Company," "LLC," or "LLC") **NEW YORK** 27-037-7402 (Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable) (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability) 11961 Northwest 11th Court 5. (Street Address of Principal Office) (Mailing Address) CORAL SPRINGS, FL 33071 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) DAVID FREUND Name: 11961 Northwest 11th Court Office Address: **CORAL SPRINGS**

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.

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: DAVID FREUND □Manager □ Manager Name: ___ 11961 Northwest 11th Court Address: □Member Address: CORAL SPRINGS, FL 33071 □ Authorized Person Person Other Other □Other_____ □Other Name: _____ □Manager Name: □Member Address: ☐Member Address: ☐ Authorized □ Authorized Person Person □Other □Other_____ □Other Other □Manager Name: ☐ Manager Name: _____ ☐ Member Address: □ Member Address: ☐ Authorized □ Authorized Person Person 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 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. Signature of an authorized person DAVID FREUND

Typed or printed name of signee

STATE OF NEW YORK

DEPARTMENT OF STATE

Certificate of Status

I, ROSSANA ROSADO, Secretary of State of the State of New York and custodian of the records required by law to be filed in my office, do hereby certify that upon a diligent examination of the records of the Department of State, as of the date and time of this certificate, the following entity information is reflected:

Entity Name: JUPITER RENEWABLES, LLC

DOS ID Number: 3819064

Entity Type: DOMESTIC LIMITED LIABILITY COMPANY

Entity Status: EXISTING
Date of Initial Filing with DOS: 06/05/2009

Statement Status: CURRENT Statement Due Date: 06/30/2021

No information is available from this office regarding the financial condition, business activity or practices of this entity.



WITNESS my hand and official seal of the Department of State, at the City of Albany, on June 23, 2021 at 12:10 P.M.

ROSSANA ROSADO, Secretary of State

Brandon C Higher

By Brendan C. Hughes

Executive Deputy Secretary of State

Authentication Number: 100000020418 To Verify the authenticity of this document you may access the Division of Corporation's Document Authentication Website at http://ecorp.dos.ny.gov