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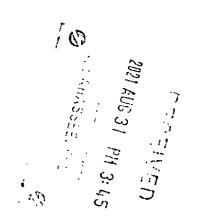
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(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
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(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer

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CORPORATION SERVICE COMPANY

1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE: 973020 8268139

AUTHORIZATION

COST LIMIT : (\$\)125.00

ORDER DATE: August 23, 2021

ORDER TIME : 2:24 PM

ORDER NO. : 973020-030

CUSTOMER NO: 8268139

FOREIGN FILINGS

NAME: SUNRUN DEMETER PLEDGOR 2021-2,

LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

_____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Alexxis Weiland -- EXT# 61592

EXAMINER:

COVER LETTER

TO:	Registration Section Division of Corporations			
SUBJ	Sunrun Demeter Pledgor 2021-2, LLC			
		ne of Limited Liability Company		
		Company for Authorization to Transact Business in Florida," Certificate of e referenced foreign limited liability company to transact business in Florida		
Please	return all correspondence concerning this matter	to the following:		
	Jami Day			
		Name of Person		
	Sunrun Inc.			
		Firm/Company		
	225 Bush Street, Suite 1400			
		Address		
San Francisco, CA 94104				
		City/State and Zip Code		
	corplegal@sunrun.com			
	E-mail address: (to b	pe used for future annual report notification)		
For fu	rther information concerning this matter, please co	all:		
Jami Day		415 580-6900 at ()		
	Name of Contact Person	Area Code Daytime Telephone Number		
Mailing Address: Registration Section		Street Address:		
		Registration Section		
	Division of Corporations	Division of Corporations		
P.O. Box 6327		The Centre of Tallahassee		
	Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		
	Enclosed is a check for the following amount: Please make check payable to: FLORIDA DE \$125.00 Filing Fee \$130.00 Filing Fe Certificate	ee & 🔲 \$155.00 Filing Fee & 🔲 \$160.00 Filing Fee, Certificate		

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

IN COMPILANCE 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:

I. Sunrun Demeter Ple			
(Name of Foreign	Limited Liability Company, must include "Limite	d Liability Com	pany," "L L.C.," or "LLC.")
l'name unavailable, enter alternate	name adopted for the purpose of transacting business in F	lorida. The alterna	te name must include "Limited Liability Company," "L L.C," or "Ll.C."
Delaware			2246331
(Jurisdiction under the law of w	hich foreign limited liability company is organized)	3	(FEI number, if applicable)
	(Date first transacted business in Florida, if prior to	market in 1	
	(See sections 605 0904 & 605,0905, F.S. to determ	registration.) ine penalty liabilit	y)
225 Bush Street, Su	ite 1400		Bush Street, Suite 1400
treet Address of Principal Office)		6	(Mailing Address)
San Francisco, CA	94104	San	Francisco, CA 94104
. Name and street addres	ss of Florida registered agent: (P.O. Box	NOT accep	table)
Name:	Corporation Service Company		_
Office Address:	1201 Hays Street		_
	Tellehenne		32301
	Tallahassee		. Florida

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.

Corporation Service Company

By: Clean Weight assistant va president

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]: Name and Address: Name and Address: Title or Capacity: Title or Capacity: Name: Sunrun Inc. Name: _____ □ Manager □Manager 225 Bush Street Address: Address: ____ **■**Member □Member **Suite 1400** □ Authorized □ Authorized San Francisco, CA 94104 Person Person □Other_ Other Other_____ □Other Name: _____ □ Manager □ Manager Name: □Member □Member Address: Address: ☐ Authorized ☐ Authorized Person Person □Other _____ □Other_____ □Other □Other____ Name: □Manager Name: □Manager Address: □Member Address: _____ □Member □ 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. Seze Signature of an authorized person

Sundance Banks, Assistant Secretary of Sunrun Inc., sole member

Typed or printed name of signee

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

DELAWARE, DO HEREBY CERTIFY "SUNRUN DEMETER PLEDGOR 2021-2, 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-THIRD DAY OF AUGUST, A.D. 2021.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SUNRUN DEMETER PLEDGOR 2021-2, LLC" WAS FORMED ON THE SEVENTEENTH DAY OF AUGUST, A.D. 2021.

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

Authentication: 203988627

Date: 08-23-21