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CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 057380 4361A

AUTHORIZATION : Spelle Blan

COST LIMIT : '\$'`125.00

ORDER DATE : September 30, 2021

ORDER TIME : 8:58 AM

ORDER NO. : 057380-155

CUSTOMER NO: 4361A

FOREIGN FILINGS

NAME: SOLV ENERGY, 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

то:	Registration Section Division of Corporations					
SUBJE	SOLV Energy, LLC					
SCDJI	Name of Limited Liability Company					
	osed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certifica and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.					
Please	turn all correspondence concerning this matter to the following:					
	Devin Grubb					
	Name of Person					
	SOLV Legal					
	Firm/Company					
	16680 W Bernardo Dr.					
Address						
	San Diego, CA, 92127					
	City/State and Zip Code					
	Legal@Solvenergy.com					
	E-mail address: (to be used for future annual report notification)					
For fur	er information concerning this matter, please call:					
	Devin Grubb 916 718-6984					
	Name of Contact Person Area Code Daytime Telephone Number					
	Mailing Address:Street Address:Registration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of TallahasseeTallahassee, FL 323142415 N. Monroe Street, Suite 810Tallahassee, FL 32303					
	Enclosed is a check for the following amount: Please make check payable to: FLORIDA DEPARTMENT OF STATE S125.00 Filing Fee S130.00 Filing Fee & S155.00 Filing Fee & S160.00 Filing Fee, Certificate Certificate of Status Certified Copy 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.

	Limited Liability Company; must include "Limite ume adopted for the purpose of transacting business in F				
DE	name adopted for the purpose of transacting business in F	47-4673720			
2. (Jurisdiction under the law of w	hich foreign limited liability company is organized)	3(FEI number, if applicable)			
9/28/2021 4.					
	(Date first transacted business in Florida, if prior to (See sections 605,0904 & 605,0905, F.S. to determ	registration) ine penalty liability)			
16680 W Bernardo D		16680 W Bernardo Dr.			
5. Street Address of Principal Office)		6. (Mailing Address)			
San Diego, CA 9212	7	San Diego, CA 92127			
			7-20 982 1		
7. Name and street addres	s of Florida registered agent: (P.O. Box	NOT acceptable)	1007-4		
Name:	Corporation Service Company		PH 11: 115		
Office Address:	1201 Hays Street		45		
	Tallahassee	32301 , Florida(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.

Corporation Service Company

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 Capacit	<u>v:</u>	Name and Address:
□Manager	Name: Swinerton Incorporated	□Manager	Name:	
■Member	Address: 16680 W Bernardo Dr.	□Member	Address: _	
□Authorized	San Diego, CA 92127	□Authorized		
Person		Person		
□Other	Other	□Other		□Other
□Manager	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. 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.

Signature of an authorized person

Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "SOLV ENERGY, 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 THIRTIETH DAY OF SEPTEMBER, A.D. 2021.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SOLV ENERGY,
LLC" WAS FORMED ON THE TWENTIETH DAY OF JULY, A.D. 2015.

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

Authentication: 204297480

Date: 09-30-21

5776013 8300 SR# 20213395065