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(Requestor's Name) (Address)	
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(City/State/Zip/Phone #)	
(Business Entity Name)	10/29/2101029008 **130.00
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TO: Registration Section Division of Corporations

SUBJECT: Hydrogen Group 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:

Caroline Quigley Name of Person Hydrogen Group LLC Firm/Company **19C Trolley Square** Address Wilmington DE 19806 City/State and Zip Code cquigley@incplan.net E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: 302 at (Caroline Quigley 428-1200 Davtime Telephone Number Name of Contact Person Area Code MAILING ADDRESS: STREET ADDRESS: **Division of Corporations Division of Corporations Registration Section** Registration Section P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301 Enclosed is a check for the following amount: Please make check payable to: FLORIDA DEPARTMENT OF STATE ☑ \$130.00 Filing Fee & □ \$155.00 Filing Fee & S125.00 Filing Fee □ \$160.00 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 LIABILIT COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. Hydrogen Group LLC

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

HYDROGEN G	MUP STAFFING SERV ame adopted for the purpose of transacting business in Flo	ICES LL orda. The alternate nu	me must include "Linuted Liability (Company," "L.L.C," or	"LI.C.
, Delaware		3.			
(Jurisdiction under the law of w	hich foreign limited liability company is organized)		(FEI number, if	applicable)	
4	(Date first transacted business in Florida, if prior to	registration.)		_	
5. <u>(Street Address of</u>	(See sections 605,0904 & 605,0905, F.S. to determ		C Trolley So	quare	
	n DE 19806	Wil	mington DE	E 19806	>
				5: 20	
7. Name and street addres	ss of Florida registered agent: (P.O. Bo)	k <u>NOT</u> accepta	ble)	121 OCT 29 PM	
Name:	Northwest Registered Ag	gent LLC		9 PH	,
Office Address:	7901 4th St N ST	E 300			محمد
	St. Petersburg		. Florida 33702		
	(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.

(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]:

manage [up to any (mut Compatibilit	Name and Address:
Title or Capacity:	Name and Address:	Title or Capacity:	Name: John Hunter
Manager	Name: Lan Temple	🖌 Manager	Name:
	19C Trolley Sq Wilmington DE 19806	Member	Address:
Member		☐ Authorized	
Authorized		Person	
Person			
Other	Other	Other	
Manager	Name:	🔲 Manager	Name:
Member	Address:	Member	Address:
	Caroline Quigley	Authorized	
Authorized	19C Trolley Sq Wilmington DE 19806	Person	
Person		Other	Other
Other	Other		
			Name:
Manager	Name:	🔲 Manager	
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.

(molene' lunder 4

Signature of an authorized person

Caroline Quigley

Delaware

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "HYDROGEN GROUP 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-SIXTH DAY OF OCTOBER, A.D. 2021.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "HYDROGEN GROUP LLC" WAS FORMED ON THE THIRD DAY OF JULY, A.D. 2012.

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



Jeffrey W. Bullock, Secretary of State

Authentication: 204506696 Date: 10-26-21

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SR# 20213609966 You may verify this certificate online at corp.delaware.gov/authver.shtml Page 1