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SECRETARY OF STAIL
FALLAHASSFE FLORID

ATR 0 6 2022 K. Brumbley CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195 7924764 REFERENCE : 589094 AUTHORIZATION : COST LIMIT : ORDER DATE: April 4, 2022 ORDER TIME : 8:15 AM ORDER NO. : 589094-010 CUSTOMER NO: 7924764 FOREIGN FILINGS NAME: TRILBY RANCH SOLAR, LLC XXXX QUALIFICATION (TYPE: LL) PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: __ CERTIFIED COPY XX PLAIN STAMPED COPY _____ CERTIFICATE OF GOOD STANDING

EXAMINER:

CONTACT PERSON: Alexxis Weiland -- EXT#

COVER LETTER

/11 (Ib 18: 20:	Trilby Ranch Solar, LLC			
SUBJECT		ne of Limited Liability Company		
		Company for Authorization to Transact Business in Florida," Certificate o referenced foreign limited liability company to transact business in Florida		
Please rett	urn all correspondence concerning this matter	to the following:		
	Cynthia Collado			
		Name of Person		
	Trilby Ranch Solar, LLC			
	-	Firm/Company		
	700 Universe Blvd.			
		Address		
	Juno Beach, FL 33408			
		City/State and Zip Code		
	corporate-governance@nee.com			
	E-mail address: (to b	e used for future annual report notification)		
For further	r information concerning this matter, please ca	ill:		
C	Cynthia Collado	561 691-7171		
_	Name of Contact Person	Area Code Daytime Telephone Number		
	failing Address:	Street Address:		
Registration Section		Registration Section		
	Division of Corporations	Division of Corporations The Centre of Tallahassee		
	P.O. Box 6327			
	fallahassee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		
P	Enclosed is a check for the following amount: Please make check payable to: FLORIDA DEI 3125.00 Filing Fee \$130.00 Filing Fee Certificate	te & 🔲 \$155.00 Filing Fee & 🔲 \$160.00 Filing Fee, Certificate		

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

IN COMPLIANCE WITH SECTION 605,0002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

	name adopted for the purpose of transacting business in Flo	wida The a	lternate name must include "Limited Liability Company," "L L.C," or "LLC
Delaware		3.	n/a
(Jurisdiction under the law of w	hich foreign limited liability company is organized)	٥.	(FEI number, if applicable)
04/15/2022			
	(Date first transacted business in Florida, if prior to i (See sections 605 0904 & 605 0905, F.S. to determine	egistration ne penalty l) iability)
700 Universe Blvd.		6	700 Universe Blvd. ATTN: Corp Gov
treet Address of Principal Office)		ο	(Mailing Address)
Juno Beach, FL 334	08		Juno Beach, FL 33408
Name and street address	ss of Florida registered agent: (P.O. Box	<u>NOT</u> a	cceptable)
Name and street address	SS of Florida registered agent: (P.O. Box David M. Lee	<u>NOT</u> a	cceptable)
		NOT a	cceptable)
Name:	David M. Lee	NOT a	cceptable) 33408

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.

David M. Lee

By:

(Registered agent's signature)

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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: Name: ESI Energy, LLC Name: _____ □Manager □Manager 700 Universe Blvd. ■Member Address: □Member Address: _____ Juno Beach, FL 33408 □Authorized □ Authorized Person Person □Other ___ □Other_ □Other____ ☐ Other_____ Name: _____ Name: □Manager □Manager □Member □Member Address: Address: □ Authorized □ Authorized Person Person □Other Other____ □Other____ Other____ Name: _____ Name: _____ □Manager □Manager Address: ☐ Member □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 talse 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

Typed or printed name of signee

Jason B. Pear



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

DELAWARE, DO HEREBY CERTIFY "TRILBY RANCH SOLAR, 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 FOURTH DAY OF APRIL, A.D. 2022.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "TRILBY RANCH SOLAR, LLC" WAS FORMED ON THE TWENTY-FOURTH DAY OF MARCH, A.D. 2022.

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



Authentication: 203087685

Date: 04-04-22