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Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To: Division of Corporations  
Fax Number : (850)617-6383

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Foreign Limited Liability Company  
ReTech PV Global, LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

2022 JUN -8 PM 4:01

S. FRANKLIN  
JUN 09 2022

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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  
COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

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

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C.," or "LLC.")

2. Delaware 88-2084400  
(Jurisdiction under the law of which foreign limited liability company is organized) (FBI number, if applicable)

4. (Date first transacted business in Florida, if prior to registration.)  
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 9422-9428 International Court North  
(Street Address of Principal Office)  
St. Petersburg, FL 33716

6. 9422-9428 International Court North  
(Mailing Address)  
St. Petersburg, FL 33716

2022 JUN - 8 AM 10:25

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Michael Quinn

Office Address: 9422-9428 International Court North  
St. Petersburg, Florida 33716  
(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)

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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:**

☒ Manager Name: Michael Quinn

☐ Member Address: \_\_\_\_\_

☐ Authorized 9422-9428 International Court North

Person St. Petersburg, FL 33716

☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

**Title or Capacity:** **Name and Address:**

☒ Manager Name: Joseph Gueiner

☐ Member Address: \_\_\_\_\_

☐ Authorized 9422-9428 International Court North

Person St. Petersburg, FL 33716

☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☒ Manager Name: Donal O'Flynn

☐ Member Address: \_\_\_\_\_

☐ Authorized 9422-9428 International Court North

Person St. Petersburg, FL 33716

☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☒ Manager Name: Frank J. Kenny

☐ Member Address: \_\_\_\_\_

☐ Authorized 9422-9428 International Court North

Person St. Petersburg, FL 33716

☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☒ Manager Name: Mitchell I. Benerofe

☐ Member Address: \_\_\_\_\_

☐ Authorized 9422-9428 International Court North

Person St. Petersburg, FL 33716

☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☐ Manager Name: \_\_\_\_\_

☐ Member Address: \_\_\_\_\_

☐ Authorized \_\_\_\_\_


Person \_\_\_\_\_

☐ 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

Michael Quinn

Typed or printed name of signer

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# Delaware

The First State

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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF  
DELAWARE, DO HEREBY CERTIFY "RETECH PV GLOBAL, 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 EIGHTH DAY OF JUNE, A.D. 2022.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "RETECH PV  
GLOBAL, LLC" WAS FORMED ON THE TWENTIETH DAY OF APRIL, A.D. 2022.

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

2022 JUN -8 AM 10:25



  
Jeffrey W. Bullock, Secretary of State

6746740 8300

SR# 20222661692

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

Authentication: 203627983

Date: 06-08-22

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