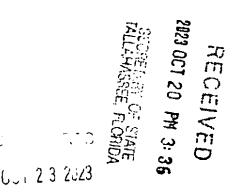
# M23000013573

(R)	equestor's Name)	
(1)	equestor's Harrier	
(A	ddress)	
(A	ddress)	
(Ci	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(B <sub>1</sub>	usiness Entity Nam	e)
(Do	ocument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
	Office Use Only	•



600417271936







### CT CORP '

1,

#### (850) 656-4724 3558 lakesore Drive Tallahassee, FL 32312

10/20/2023

D	ate:	10/20/2023	- w: DW
	<del>-</del>	Acc#I20160000072	- William
Name:	Palatka En	ergy 3, LLC	
Document #:			
Order #:	15181317		
Certified Copy of Arts & Amend: Plain Copy: Certificate of Good Standing: Certified Copy of			
Apostille/Notarial Certification:		Country of Destination: Number of Certs:	
Filing:	Certified: Plain: COGS:		Email Address for Annual Report Notifications
Availability  Document  Examiner  Updater  Verifier  W.P. Verifier  Ref#	Amount:	\$ 155.00	

Thank you!

#### COVER LETTER

Div	ision of Corporations	
SUBJECT:	Palatka Energy 3, LLC	
		Name of Limited Liability Company
The enclosed Existence, a	d "Application by Foreign Limited nd check are submitted to register t	Liability Company for Authorization to Transact Business in Florida," Certificate of the above referenced foreign limited liability company to transact business in Florida.
Please return	n all correspondence concerning thi	s matter to the following:
	DESRI Legal Ops	
		Name of Person
	D. E. Shaw Renewable Inves	tments, L.L.C.
	<del></del>	Firm/Company
	575 Fifth Avenue, 35th Floor	
		Address
	New York, NY 10017	
		City/State and Zip Code
	desri-legal-ops@world.deshaw	v.com
	E-mail addr	ess: (to be used for future annual report notification)
For further i	information concerning this matter.	please call:
DF	ESRI Legal Ops	212 478-0000 at (
-	Name of Contact Per	
	niling Address:	Street Address:
	egistration Section	Registration Section
	vision of Corporations  O. Box 6327	Division of Corporations The Centre of Tallahassee
	llahassee, FL 32314	2415 N. Monroe Street, Suite 810
1 4	manassee, 1 E 52514	Tallahassee, FL 32303
Ple	\$125.00 Filing Fee	Amount:  IDA DEPARTMENT OF STATE  Filing Fee & S155.00 Filing Fee & S160.00 Filing Fee, Certificate ertificate of Status Certified Copy of Status & Certified Copy

Registration Section

TO:

## 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:

i name unavailable, enter alternate n	ame adopted for the purpose of transacting business in Fl	orida The	alternate name must include "Limited Liability Con-	ipany," "L.L.C," or "L
Delaware		2		
(Jurisdiction under the law of which foreign limited liability company is organized)		٥.	(FEI numbet, if applicable)	
Not applicable				
· ·	(Date first transacted business in Florida, if prior to (See sections 605 0904 & 605,0905, F.S. to determine	registration	t ) hability)	
575 Fifth Avenue, 35th	Floor,		575 Fifth Avenue, 35th Floor,	
reet Address of Principal Office)		0.	(Mailing Address)	<del></del>
New York, NY 10017			New York, NY 10017	
				177
				<u> </u>
Name and street addres	s of Florida registered agent: (P.O. Box	NOT	acceptable)	
	C T Corporation System			:
Name:	C 1 Corporation System		<del></del>	 5.1
Office Address:	1200 South Pine Island Road			7
	Plantation		33324	
			, Florida	

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.

C. T. Corporation System

By: College Mark Holloway, Assistant Secretary

(Registered agent's signature)

845 Renewables LLC	Title or Capacity:		Name and Address:
Name:	□Manager	Name:	
Address: 575 Fifth Avenue, 35th Fl, New York, NY 10017	□Member	Address:	_
	□Authorized		<u>.</u>
	Person		
Other	□Other		□Other
Name:	□Manager	Name:	
Address:	□Member	Address:	
	□Authorized		
<del></del>	Person		
Other	□Other	<u></u>	□Other
Name:	□Manager	Name:	
Address:	□Member	Address:	
	□Authorized		
	Person		
Other	□Other		□Other
	Other	Person	Person  Other

Typed or printed name of signee

Page 1



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

DELAWARE, DO HEREBY CERTIFY "PALATKA ENERGY 3, 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 TWENTIETH DAY OF OCTOBER, A.D. 2023.

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

Authentication: 204419579

Date: 10-20-23

2512344 8300 SR# 20233781539