## M23000013689

(Requestor's Name)
(Address)
(Addi C33)
(Address)
(0) (0) (0)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer.

Office Use Only



100417581771

023 OCT 25 PM 4: 26

RECEIVED

VGLED 1335SVA VALVE SHOLD VALV



115 N CAŁHOUN ST., STE. 4 TAŁLAHASSEE, FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAŁ.COM

Account#: 120000000088

Date: 10/25/2023
Name:Jennifer
Reference #:
Entity Name: COUNTERPOINTE ENERGY SOLUTIONS (FL) II LLC
<ul> <li>✓ Articles of Incorporation/Authorization to Transact Business</li> <li>☐ Amendment</li> </ul>
☐ Change of Agent ☐ Reinstatement
☐ Conversion ☐ Merger
<ul><li>□ Dissolution/Withdrawal</li><li>□ Fictitious Name</li><li>□ Other</li></ul>
Authorized Amount: 125.00 Signature:

F: 800.944.6607



115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

Account#: I20000000088

Date:	10/25/2023	
Name:		_
Reference	#:2157174	_
		RGY SOLUTIONS (FL) II LLC
✓ Artic	cles of Incorporation/Authorization	to Transact Business
☐ Ame	endment	
Cha	nge of Agent	
☐ Rein	nstatement	
Con	version	
☐ Mero	ger	
☐ Diss	olution/Withdrawal	
☐ Ficti	tious Name	
Othe	er	
Authorized	Amount: 125.00	
Signature:		

## 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 HABILITY COMPANYTO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

ne unavailable, enter alternate name ad	lopted for the purpose of transacting busine	s in Florida. The alternat	e name must melude	"Limited Liability Co	ompany," "L.L.	C," or "LI C.	.")
Del	aware	3	93-3956097				
Jurisdiction under the law of which to	reign lineted liability company is organized	<del>n</del>	(FEI number, if applicable)				
	Not Applica	able					
(	Date first transacted business in Florida, if See sections 605 0904 & 605 0905, F.S. to	prior to registration ) o determine penalty liabili	rş )		-		
777 W Putnam Ave 777 W Putnam Ave		Ave					
(Street Address of Principa	il (Hisc)	0.		Mailing Address)			
FL 3-	2		FL 3-2				
Greenwich, C	CT 06830		Greenwich, CT 06830				
Name and <u>street address</u> of  Name:	Florida registered agent: (P.C		ptable) —			2023 OCT 25	
Office Address:	115 North Calhoun S	st. Suite 4				-P	
	Tallahassee	· · · · · · · · · · · · · · · · · · ·	, Florida	32301	•	<b>կ։</b> 2լ	
	(City)		1 101100	(Zip code)	_	5	

(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): Name and Address: Title or Capacity: Name and Address: Title or Capacity: J. Christopher Hoeffel Eric J. Alini Manager Name: Manager 777 W Putnam Ave 777 W Putnam Ave Member Address: \_ Member FL 3-2 FL 3-2 ✓ Authorized Authorized Greenwich, CT 06830 Greenwich, CT 06830 Person Person ⊠]Other\_\_President CEO Other Other **X**Other Name: \_\_\_\_\_Counterpointe Energy Solutions II LLC Manager Manager 777 W Putnam Ave **⊠**Member Address: Member | FL 3-2 Authorized ☐ Authorized Greenwich, CT 06830 Person Person \_\_Other\_\_\_\_ Other Other Other\_ Manager 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 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

Eric J. Alini

Typed or printed name of signer

## COVER LETTER

•

TO: Registration Section

Division	of Corporations				
SUBJECT: Counterpointe Energy Solutions (FL) II LLC  Name of Limited Liability Company					
Please return all c	correspondence concerning this matter to the following:				
	Eric J. Alini	_			
	Name of Person				
	Counterpointe Sustainable Advisors LLC	_			
	Firm/Company				
	777 W Putnam Ave	_			
	Address				
	Greenwich, CT 06830	_			
	City/State and Zip Code				
	jchoeffel@counterpointesre.com	-			
	E-mail address: (to be used for future annual report notification)				
For further inform	nation concerning this matter, please call:				
	Joseph Kelly 917 533-3768	<del>-</del>			
	Name of Contact Person Area Code Daytime Telephone Number				
Division Registrat P.O. Box	NG ADDRESS: of Corporations bition Section x 6327 seec, FL 32314  STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301				
Please m	d is a check for the following amount:  nake check payable to: FLORIDA DEPARTMENT OF STATE				
LJ \$125	5.00 Filing Fee \$\Bigcup \text{\$\subset} \text	Fee, Certificate rtified Copy			

Page 1

## Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "COUNTERPOINTE ENERGY SOLUTIONS (FL) II

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-FIFTH DAY OF OCTOBER, A.D. 2023.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "COUNTERPOINTE ENERGY SOLUTIONS (FL) II LLC" WAS FORMED ON THE SECOND DAY OF OCTOBER, A.D. 2023.

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

Authentication: 204443405

Date: 10-25-23

2432049 8300 SR# 20233808317