# M240000006996

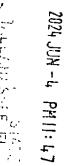
(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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### **COVER LETTER**

TO:

MCG Energy Solutions, LLC IECT:	
Nai	me of Limited Liability Company
nclosed "Application by Foreign Limited Liability ence, and check are submitted to register the above	v Company for Authorization to Transact Business in Florida," Certific c referenced foreign limited liability company to transact business in l
e return all correspondence concerning this matter	to the following:
Brenda Huebsch	
	Name of Person
MCG Energy Solutions, LLC	
	Firm/Company
901 Marquette Ave., Suite 750	
	Address
Minneapolis, MN 55402	
	City/State and Zip Code
accounting@mcgenergy.com	
E-mail address: (to l	be used for future annual report notification)
orther information concerning this matter, please c	all:
Brenda Huebsch	612 767-7742
Name of Contact Person	at () Area Code Daytime Telephone Number
Mailing Address:	Street Address:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
P.O. Box 6327	The Centre of Tallahassee
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810
	Tallahassee, FL 32303

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

IN COMPLIANCE WITH SECTION 605,0002, FLORIDA STATUTEX THE FOLLOWING IS SUBMITTED TO REGISTER A FOREGOVELIMITED HABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. MCG Energy Solutions (Name of Foreign	s, LLC Limited Liability Company, must include "Limited I	Liability Company," "L.L.C.," or "LLC")		_
If name unavailable, enter alternate	name adopted for the purpose of transacting business in Flori	ida. The alternate name trust include "Earnited Lie	ability Company," "L.L.C," or	"LLC.
Delaware (Jurisdiction under the law of which foreign limited liability company is organized)		3. 26-4251496 (FEI numb		
NA	hich toreign limited hability company is organized)	(FEI numbe	er, if applicable)	
1.	(Date first transacted business in Florida, if prior to re (See sections 605 0904 & 605 0905, F.S. to determine	gistration ) penalty liability)	<u>_</u>	
901 Marquette Ave, Si	aite 750	6. (Mailing Address)	50	_
Minneapolis, MN 5540	<u> </u>	Minneapolis, MN 55402	20 (1)	_
. Name and street address	ss of Florida registered agent: (P.O. Box )	NOT_acceptable)	2024 JUN -1	
Name:	C T Corporation System		PH.	
Office Address:	1200 South Pine Island Road		PHII: 47	
	Plantation	. Florida (Zincayle)		

#### 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.

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Ternell Kearney	ICITICII	rearriey	Oats

Digitally signed by Ternell learney DN: chill Ternell Kearney, o. ou, email-ternell kearney@wolterskluwer.com, c=US Date: 2024 03 21 10:27.50 -04 00

(Registered agent's signature)

 $\mathcal{F}_{i} = \{ i, i \in \mathcal{K} \mid i \in \mathcal{K} \mid i \in \mathcal{K} \mid i \in \mathcal{K} \}$ 

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:
■Manager	Name: Mike Prickett	■Manager	Name: Brenda Huebsch
□Member	Address: 901 Marquette Ave	■Member	Address: 901 Marquette Ave
Authorized		■Authorized	Suite 750
Person	Minneapolis, MN 55402	Person	Minneapolis, MN 55402
Other	Other	□Other	Other
□Manager	Name:	□Manager	Name:
□Member	Address:	□Member	Address:
□Authorized	<del></del>	□Authorized	
Person		Person	
Other	Other	□Other	Other
□Manager	Name:	□Manager	Name:
□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. 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.

-	BSHL	Digitally signed by Brenda S Huebsch DN cneBrenda S Huebsch, peMCG Energy Solutions, LCC, puiseFO email=bhuebsch@mcgenergy.com	
	. 3.	ाक्रामध्वयुग्ध्यानभागः।।। ०५ ००	
Brenda S. Huebsch, CFO			

Page 1

## Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "MCG ENERGY SOLUTIONS, 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-FOURTH DAY OF MAY, A.D. 2024.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "MCG ENERGY SOLUTIONS, LLC" WAS FORMED ON THE TWELFTH DAY OF FEBRUARY, A.D. 2009.

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

A LAND TO SERVICE OF THE PARTY OF THE PARTY

Authentication: 203554441

Date: 05-24-24

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SR# 20242430181