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COVER LETTER

TO:	Registration Section Division of Corporations							
SUBJE	Solar-Fi Advisor, LLC ECT:							
	Name of Limited Liability Company							
		Company for Authorization to Transact Business in Florida," Certificate referenced foreign limited liability company to transact business in Florida.						
lease	return all correspondence concerning this matter	to the following:						
	Christian Clayton							
		Name of Person						
	SunRocket Capital, LLC							
		Firm/Company						
	3921 Alton Road, Suite 439							
		Address						
	Miami Beach, FL 33140							
	City/State and Zip Code							
	legal@sunrocketcapital.com							
	e used for future annual report notification)							
For fur	ther information concerning this matter, please ca	all:						
	Christian Clayton	301 385-4037 at ()						
	Name of Contact Person	Area Code Daytime Telephone Number						
	Mailing Address: Registration Section	Street Address: 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						
	Enclosed is a check for the following amount: Please make check payable to: FLORIDA DEI □ \$125.00 Filing Fee □ \$130.00 Filing Fe Certificate	ee & 🔲 \$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 605,0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO RECISIER A FOREIGN. LIMITED HABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

aware		99-0997426		
	hich foreign limited liability company is organized)	7	(FEI number, if applicable)	
iriskiicuon under the law of w	nich toreign innised habitity company is organized)	(FEI numo		
2/2024				
···	(Date first transacted besidess in Florada if print to r	egistration)		
	(Date first transacted business in Florida, if prior to r (See sections 605 0904 & 605 0905, F.S. to determine	e penalty liability)		
5 NW 26th St., Suite	e 620	3921 Alton Road, Suite 439		
ddress of Principal Office)		6. (Mailing Address)		
		(<u>.</u>		
ami, FL 33127		Miami Beach, FL 33140		
me and street addres	ss of Florida registered agent: (P.O. Box	NOT acceptable)	© : 2	
me and <u>street addres</u> Name:	SunRocket Capital, LLC	NOT acceptable)	2024 HAY 2	
		NOT acceptable)	28	
Name:	SunRocket Capital, LLC 545 NW 26th St. Miami	NOT acceptable) , Florida	± 1 N	
Name:	SunRocket Capital, LLC 545 NW 26th St.	33127	28 PHIO:	

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: Brian A. Sidman	□Manager	Name:
□Member	Address: 3921 Alton Rd. Suite 439	□Member	Address: 3921 Alton Rd., Suite 439
□Authorized	Miami Beach, FL 33140	■Authorized	Miami Beach, FL 33140
Person		Person	
Sole Mana	ger CEO	President Other	Other
□Manager	Taimur Jamil Name:	⊟Manager	Derek Gabriel, Sr.
□Member	Address: 3921 Alton Road, Suite 439	□Member	Address: 3921 Alton Road, Suite 439
≅ Authorized	Miami Beach, FL 33140	■Authorized	Miami Beach, FL 33140
Person		Person	
CIO Other	Other	≅Other	□Other
□Manager	Christian Clayton	□Manager	Name:
□Member	Address: 3921 Alton Road, Suite 439	□Member	Address:
■Authorized	Miami Beach, FL 33140	□Authorized	
Person		Person	
■OtherGeneral Co	ounsel 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.

Chk 1.88	
Signature of an authorized person	
Christian J. Clayton, General Counsel/Authorized Person	
Typed or printed name of signee	

Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "SOLAR - FI ADVISOR, 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-EIGHTH DAY OF FEBRUARY, A.D. 2024.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SOLAR - FI

ADVISOR, LLC" WAS FORMED ON THE TWENTY-FIFTH DAY OF JANUARY, A.D.

2024.

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

Authentication: 202909877

Date: 02-28-24

2993903 8300 SR# 20240774857