M24000014497

(Requestor's Name)					
(Address)					
(Address)					
(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



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2024 NOV 14 PH 3:

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(09 15 2024 K. Brumbley



Tallahassee, FL 32301-2607 850-558-1500, Ext: x62969

To: Department Of State, Division Of Corporations

From: Amanda Miller

Ext: x62969 Date: 11/14/24

Order #: 1679306-1

Re: Mhi Hydrogen Infrastructure LLC

Processing Method: Routine

TO WHOM IT MAY CONCERN:

Enclosed please find:

Application for Certificate of Authority

Amount to be deducted from our State Account: \$125.00 - FL State Account Number:

12000000195

Certificate of Good Standing from State of Incorporation

Please take the following action:

File in your office on basis Issue Proof of Filing

Special Instructions:

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

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

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

•	FRASTRUCTURE LLC Limited Liability Company, must include "Limite	ed Liabílity	y Company," "L.L.C.," or "L.L.C.")	
(lf name unavailable, enter alternate r	name adopted for the purpose of transacting business in F	lorida The	alternate name must include "Lumited	Liability Company," "L L C," or "LLC ")	
Delaware 2.		3.	99-1636337		
(Jurisdiction under the law of which foreign limited liability company is organized)		27.	(FEI number, 11 applicable)		
February 28, 2024					
⊶.	(Date first transacted business in Florida, if prior to (See sections 605 0904 & 605 0905, F.S. to determ	registration	ı) liability)		
106 Isabella Street, Suite 502 5.		6	6. (Mailing Address)		
Street Address of Principal Office)		0.			
Pittsburgh, Pennsylvania 15212			Pittsburgh, Pennsylvania 15212		
				20	
7. Name and street addres	s of Florida registered agent: (P.O. Bo	NOT:	acceptable)	24 Ni	
Name:	Corporation Service Company			APPROV AND FILEI 2024 NOV 1 4 CALLARIASSE	
Office Address:	1201 Hays Street			PH 2:	
	Tallahassee		3230 1 , Florida		
	(Cny)		(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.

Corporation Service Company

Shauna Godbolt ---

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: Title or Capacity: Name and Address: Name and Address: Mitsubishi Power Americas, Inc Name: Michael Ducker ■ Manager □Manager 106 Isabella Street, Suite 502 400 Colonial Center Parkway ■Member Address: □Member Lake Mary, Florida 32746 Pittsburgh, Pennsylvania 15212 □ Authorized **■** Authorized Person Person Other____ Other □Other______ Other Shinsuke Murakami Name: William Newsom **Manager** ■ Manager Address: ____ Address: 400 Colonial Center Parkway □Member □Member Lake Mary, Florida 32746 Lake Mary, Florida 32746 ☐ Authorized □ Authorized Person Person □Other____ Other Other Other Henry Ware **■** Manager □ Manager Name: Address: 400 Colonial Center Parkway □Member □Member Address:

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.

☐ Authorized

Person

□Other

Other

Lake Mary, Florida 32746

□Other

□ Authorized

Person

□Other

- 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.

Docusigned by:	,	
A686C848398747D	Signature of an authorized person	
Michael Ducker, CEO		

Page 1



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

DELAWARE, DO HEREBY CERTIFY "MHI HYDROGEN INFRASTRUCTURE 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 THIRTEENTH DAY OF NOVEMBER, A.D. 2024.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "MHI HYDROGEN INFRASTRUCTURE LLC" WAS FORMED ON THE TWENTY-EIGHTH DAY OF FEBRUARY, A.D. 2024.

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

THE STATE OF THE S

Authentication: 204868091

Date: 11-13-24