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To:

Division of Corporations

Fax Number : (850)617-6383

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Foreign Limited Liability Company **COURSE 2 ENERGY LLC**

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COVER LETTER

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	C	OVER LETTER 'VV	,,,
	stration Section ion of Corporations		
	COURSE 2 ENERGY LLC		
SUBJECT: _	Name o	of Limited Liability Company	
		ompany for Authorization to Transact Business in Florida," Cert ferenced foreign limited liability company to transact business in	
Please return a	Il correspondence concerning this matter to t	he following:	
	LOVETTE DOBSON		
		Name of Person	
	******	Firm/Company	
	17350 STATE HWY 24	9 STE 220	
	17330 STATE (1001 24	Address	
	HOUSTON, TX 77064		
	City	/State and Zip Code	
	EFILE1234@INCFILE.CO	Sed for future annual report notification)	
For further info	prination concerning this matter, please call:		
LO	VETTE DOBSON	at (1 Area Code) 888-462-3453 Daytime Telephone Number	
	Name of Contact Person	Area Code Daytime Telephone Number	
	ng Address:	Street Address:	
	stration Section	Registration Section	
	sion of Corporations Box 6327	Division of Corporations The Centre of Tallahassee	
	hassee, FL 32314	2415 N. Monroe Street, Suite 810	
		Tallahassee, FL 32303	
Please	sed is a check for the following amount: c make check payable to: FLORIDA DEPAI 25.00 Filing Fee S \$130.00 Filing Fee S Certificate of S	& 🔲 \$155.00 Filing Fee & 🔲 \$160.00 Filing Fee, Certif	

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

IN COMPLIANCE WITH SECTION 605.0302, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED LIABILITY COMPANY TOTRANSACT BUSINESS IN THE STATE OF FLORIDA:

i mine this venible. Circl attende	name adopted for the purpose of transacting business in Flor	ida. The alternate name must	include "Limited Liai	oility Company," "L.L. C."	м "LLC ")
Delaware (Jurisdiction under the law of which foreign hunted highlits company is organized		3	(FEI number, (Capplicable)		
()	•				
·	(Date first transacted business in Florids, it prior to re (See sections 605,0004 & 605,0005; F.S. to determine	gistration)			
1000 Printal			iokall Av	•	
1000 Brickel Street Address of Principal Offices	i Ave	6. 1000 Br	ickell Av	<u> </u>	
Ste 715		Ste 715			
Miami, FL 33	131	Miami, F	L 33131		
Name and street addre	ss of Florida registered agent: (P.O. Box	NOT acceptable)		2021	
Name:	Nadim Barakat			2024 NOV 1	となっている。
	2222 Many Charat Colle	116		5 PA	
Office Address:	3390 Mary Street Suite				•
Office Address:	Coconut Grove	, Florid	_{la} 33133	12: 34 	
. Office Address: . tegistered agent's accep	Coconut Grove	, Floric	la 33133 (Zip code)	15 PH 12: 34	

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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: TRANSFORMATIONAL Name: MECHERO ENERGY LLC Name: HOLDINGS LLC □Manager □Manager Address: 108 W 13th St Address: 1000 Brickell Ave ⊠Member **≊**Member Wilmington, DE 19801 Ste 715 **∐** Authorized □ Authorized Miami, FL 33131 Person Person □Other Other □ Other____ □ Other **HEAT AND** Name: MASS TRANSFER LLC ∐Manager □Manager Name: Address: 1001 Brickell Bay Dr ∐Member Address: Member Ste 2730 □ Authorized Authorized Miami, FL 33131 Person Person □Other____ □Other____ □Other Other___ Name: ☐ Member □Member Address: Address: ____ □ Authorized □ Authorized Person Person □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.

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$Delaware \ \tiny \text{(((H24000378795 3)))} \\ \text{Page 1}$ The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "COURSE 2 ENERGY 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 FOURTEENTH DAY OF NOVEMBER, A.D. 2024.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "COURSE 2 ENERGY LLC" WAS FORMED ON THE TWENTY-THIRD DAY OF NOVEMBER, A.D. 2022.

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

Authentication: 204871613

Date: 11-14-24