

Filing Fee: \$150.00

ID Number: _____



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State
Corporations Division
148 W. River Street
Providence, Rhode Island 02904-2615

LIMITED LIABILITY COMPANY

APPLICATION FOR REGISTRATION

Pursuant to the provisions of Section 7-16-49 of the General Laws of Rhode Island, 1956, as amended, the undersigned foreign limited liability company hereby applies for a Certificate of Registration to transact business in the state of Rhode Island, and for that purpose submits the following statement:

1. The name of the limited liability company is:

Eastern CT Solar LLC

2. The name, if different, under which it proposes to register and transact business in Rhode Island is:

3. The limited liability company is organized under the laws of Connecticut

4. The date of its organization is November 18, 2014

5. The period of duration of the limited liability company is (if perpetual, so state) perpetual

6. The address of the limited liability company's resident agent in Rhode Island is:

One Richmond Square, STE 125B Providence, RI 02906
(Street Address, not P.O. Box) (City/Town) (Zip Code)

and the name of the resident agent at such address is Registered Agents Inc
(Name of Agent)

7. The secretary of state is appointed the agent of the foreign limited liability company for service of process if at any time there is no resident agent or if the resident agent cannot be found or served following the exercise of reasonable diligence.

8. The address of any office required to be maintained in the state or other jurisdiction under the laws of which the limited liability company is organized is:

689 Pendleton Hill RD, North Stonington, CT. 06359

9. The mailing address for the limited liability company is:

P.O. Box 82, North Stonington, CT. 06359

FILED *m*

MAY 14 2015

BY CM 248893
8:51

2015 MAY - 7 AM 11:12

SECRETARY OF STATE
CORPORATIONS DIV

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CORPORATIONS DIV
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10. Management of the Limited Liability Company:

A. The limited liability company is to be managed by its members. *(If you have checked this box, go to item no. 11.)*

or

B. The limited liability company is to be managed by one (1) or more managers. *(If the limited liability company has managers at the time of the filing of these Articles of Organization, state the name and address of each manager.)*

<u>Manager</u>	<u>Address</u>
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

11. This application is accompanied by a certificate of good standing duly authenticated by the secretary of state or other authorized officer of the jurisdiction under which the foreign limited liability company was organized.

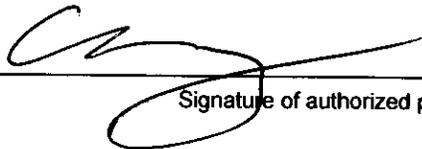
Under penalty of perjury, I declare and affirm that I have examined this Application for Registration, including any accompanying attachments, and that all statements contained herein are true and correct.

Date: 5/5/2015

Eastern CT Solar LLC

Print Exact Name of Limited Liability Company Making Application

By



Signature of authorized person

Office of the Secretary of the State of Connecticut

I, the Connecticut Secretary of the State, and keeper of the seal thereof,
DO HEREBY CERTIFY, that articles of organization for

EASTERN CT SOLAR LLC

a domestic limited liability company, were filed in this office on November 18, 2014. The following is
a list of all documents filed in this office:

Filing Type:	File Date/Time:	Effective Date/Time:
ARTICLES OF ORGANIZATION	November 18, 2014 08:30 AM	November 18, 2014 08:30 AM

Articles of dissolution have not been filed, and so far as indicated by the records of this office such
limited liability company is in existence.



Secretary of the State

Date Issued: May 11, 2015

2015 MAY 14 AM 8:51
SECRETARY OF STATE
CORPORATIONS DIV

Business ID: 1161296

Longform

Certificate Number: 2015132584001

Note: To verify this certificate, visit the web site <http://www.concord.sots.ct.gov>



State of Rhode Island and Providence Plantations
Department of State | Office of the Secretary of State
Nellie M. Gorbea, *Secretary of State*

I, NELLIE M. GORBEA, Secretary of State of the State of Rhode Island
and Providence Plantations, hereby certify that this document, duly executed in
accordance with the provisions of Title 7 of the General Laws of Rhode Island, as
amended, has been filed in this office on this day:

A handwritten signature in blue ink, appearing to read "Nellie M. Gorbea". The signature is fluid and cursive, written in a professional style.

Nellie M. Gorbea
Secretary of State

