

MAIL TO:

Division of Business Services 148 W. River Street, Providence, Rhode Island 02904-2615 Phone: (401) 222-3040

Website: www.sos.ri.gov

DEC 19 2016 950

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7. The mailing address for the limited liability company is:		
32 Wianno Avenue, Osterville, MA 02655		
8. Management of the Limited Liability Company:		
The limited liability company is managed:		
By its members (If you have checked this box, go to Section 9. (DO NOT fill out the chart below.)		
By one (1) or more managers (List managers below)		
MANAGER	ADDRESS	
Robert Madonna	886 Main Street, Osterville, MA 02655	
Christopher Stavros	886 Main Street, Osterville, MA 02655	
9. This application is accompanied by a Certificate of Good Standing/Letter of Status issued by the proper officer of the state or country under the laws of which it is formed that is dated within 60 days of the filing of this document.		
10. Date when this application for Certificate of Registration will be effective: CHECK ONLY ONE BOX		
Date received (Upon filing)		
Later effective date (Date must be no more than 30 days from the day of filing) January 1, 2017		
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.		
Type or Print Name of LLC		Date
Racepoint Energy, LLC		December <u>15</u> , 2016
Signature of Authorized Pergon SIGN DOCUMENT HERE		



The Commonwealth of Massachusetts Secretary of the Commonwealth State House, Boston, Massachusetts 02133

December 8, 2016

TO WHOM IT MAY CONCERN:

I hereby certify that a certificate of organization of a Limited Liability Company was filed in this office by

RACEPOINT ENERGY, LLC

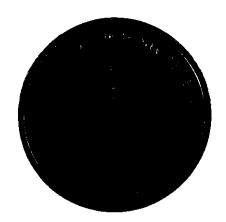
in accordance with the provisions of Massachusetts General Laws Chapter 156C on May 12, 2015.

I further certify that said Limited Liability Company has filed all annual reports due and paid all fees with respect to such reports; that said Limited Liability Company has not filed a certificate of cancellation or withdrawal; and that said Limited Liability Company is in good standing with this office.

I also certify that the names of all managers listed in the most recent filing are: ROBERT MADONNA

I further certify, the names of all persons authorized to execute documents filed with this office and listed in the most recent filing are: **ROBERT MADONNA**

The names of all persons authorized to act with respect to real property listed in the most recent filing are: **ROBERT MADONNA**



In testimony of which,

I have hereunto affixed the

Great Seal of the Commonwealth

on the date first above written.

Secretary of the Commonwealth

William Travin Galicin

Processed By:KMT

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:

Nellie M. Gorbea
Secretary of State

Tullin U. Horler

