RI SOS Filing Number: 201880911350 Date: 11/7/2018 2:26:00 PM



State of Rhode Island and Providence Plantations

Department of State - Business Services Division

Application for Registration

FOREIGN Limited Liability Company

→ Filing Fee: \$150.00

R.I. DESTATE SYCS DIVERNON -7 PM 2: 26

| Pursuant to the provisions of RIGL <u>7-16-49</u> , the undersigned | | |
|---|--------------------------------------|-------------------------------|
| applies for a Certificate of Registration to transact business purpose submits the following statement: | in the State of Rhode Island, and | d for that |
| The name of the limited liability company is: | | - |
| Clearway Energy Group LLC | | |
| Is this company organized in its state or country of formation | on as a low-profit limited liability | company? Yes No 🗵 |
| The name, if different, under which it proposes to register a | and transact business in Rhode I | sland is: |
| | | |
| 2. The LLC is organized under the laws of: | Delaware | |
| 3. The date of its organization is: | 03/30/2016 | |
| And the period of its duration is: CHECK ONE BOX ONLY | | |
| ▼ Perpetual (on-going) | | |
| Date certain for dissolution | | - <u>-</u> - |
| 4. The name and address of the resident agent/office in Rh | ode Island is: | |
| Agent Name CT Corporation System | | |
| Street Address (<u>NOT</u> a P.O. Box) 450 Veterans Memorial Pa | rkway, Suite 7A | |
| City/Town East Providence | State RHODE ISLAND | Zip Code 02914 |
| 5. The purpose or purposes which it proposes to pursue in | the transaction of business in R | hode Island are: |
| Holding company | | |
| | | |
| | | |
| | | |
| | Check the b | oox to indicate an attachment |
| | | |

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov 8:26 FILED

NOV 07 2018

BOX 50 - Revised: 11/2017

| 6. The RI Department 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. | | | | |
|---|---|----------------------|--|--|
| 7. The address of the office required to be maintained in the state or country of its organization by the laws of that state or, if not so required, of the principal office of the foreign limited liability company is: | | | | |
| 100 California Street Suite 400, San Francisco | o, CA 94111 | | | |
| 8. The mailing address for the limited liabi | lity company is: | | | |
| 100 California Street Suite 400, San Francisco | , CA 94111 | | | |
| 9. Management of the Limited Liability Company: | | | | |
| The Limited Liability Company is to be managed by: CHECK ONLY ONE BOX | | | | |
| 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 | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| 10. This application must be accompanied by a <u>Certificate of Good Standing/Letter of Status</u> from the state or country of formation dated within 60 days of the date of filing. | | | | |
| 11. Date when this application for Certificate of Registration will be effective: CHECK ONE BOX ONLY | | | | |
| ☑ Date received (Upon filing) | | | | |
| Later effective date (Date must be no more than 30 days from the date of filing) | | | | |
| | rm that I have examined this Application for Registr atements contained herein are true and correct. | ation, including any | | |
| Type or Print Name of LLC | | Date | | |
| Clearway Energy Group LLC | | 10/31/2018 | | |
| Signature of Authorized Person | Itein | | | |

Page 1



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

DELAWARE, DO HEREBY CERTIFY "CLEARWAY ENERGY GROUP 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 FIFTH DAY OF NOVEMBER, A.D. 2018.

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

Authentication: 203835475

Date: 11-05-18

RI SOS Filing Number: 201880911350 Date: 11/7/2018 2:26:00 PM



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:

November 07, 2018 02:26 PM

Nellie M. Gorbea Secretary of State

Tullin U. Soler

