		_ <del></del>		
State of Rhode Island				
Department of State - Business Services I	Division			
~40rt *	RECEIVE	STATE		
Application for Registration	RECEIVE R.I. DEPT. OF BUS SYCS			
FOREIGN Limited Liability Company				
→ Filing Fee: \$150.00	2022 OCT 28	A II: 35		
7 ming r cc. @100.00				
Pursuant to the provisions of RIGL <u>7-16-49</u> , the undersigned fo applies for a Certificate of Registration to transact business in t purpose submits the following statement:	• • • •	-		
1. The name of the limited liability company is:				
ENGIE Power & Gas LLC				
Is this company organized in its state or country of formation a	as a low-profit limited liability co	mpany? Yes 🚺 No 🗶		
The name, if different, under which it proposes to register and transact business in Rhode Island is:				
2. The LLC is organized under the laws of: New York				
3. The date of its organization is: 9/2/2004				
And the period of its duration is: CHECK ONE BOX ONLY				
X Perpetual (on-going)				
Date certain for dissolution				
4. The name and address of the resident agent/office in Rhod	e Island is:			
Agent Name Business Filings Incorporated				
Street Address (NOT a P.O. Box)	· <u>-</u> ·····	· _ · · · · · · · · · · · · · · ·		
450 Veterans Memorial Parkway, Suite 7A				
City/Town	State	Zip Code		
East Providence	RHODE ISLAND	02914		
5. The purpose or purposes which it proposes to pursue in the	transaction of business in Rho	de Island are:		
Energy services provider				
	Check the bo	x to indicate an attachment		
MAIL TO:		FILED 1135		
Division of Business Services		OFT 2 3 2022		
148 W. River Street. Providence, Rhode Island 02904-2615 Phone: (401) 222-3040				
Website: www.sos.ri.gov	BY	OCT 2 3 2322 MS F90 GY		

	ed the agent of the foreign limited liability company he resident agent cannot be found or served follow	
<ol> <li>The address of the office required to b if not so required, of the principal office o 920 Railroad Ave. Woodmere NY, 1159</li> </ol>		ion by the laws of that state or,
8. The mailing address for the limited liab 920 Railroad Ave. Woodmere NY,	• • •	
9. Management of the Limited Liability Co	ompany:	
The Limited Liability Company is to be m	anaged by: CHECK ONLY ONE BOX	
By its members (If you have checked	t this box, DO NOT fill out the chart below)	
By one (1) or more managers (List n	nanagers below)	
MANAGER	ADDRESS	· · · · · · · · · · · · · · · · · · ·
William Jordan	920 Railroad Ave. Woodmere NY, 11598	
Shyam Persaud	920 Railroad Ave. Woodmere NY, 11598	
10. This application must be accompanie formation dated within 60 days of the dat	d by a <u>Certificate of Good Standing/Letter of Status</u> e of filing.	$\frac{1}{2}$ from the state or country of
11. Date when this application for Certific	ate of Registration will be effective: CHECK ONE E	BOX ONLY
X Date received (Upon filing)	n more than 90 days from the date of filing)	
· · · ·	o more than 90 days from the date of filing)	A
	firm that I have examined this Application for Regis statements contained herein are true and correct.	tration, including any
Type or Print Name of LLC ENGIE Power & Gas LLC		Date 6/30/2022
Signature of Authorized Person	s_d	. <b>.</b>

If you have any questions, please call us at (401) 222-3040, Monday through Friday, between 8:30 a.m. and 4:30 p.m., or email corporations@sos.ri.gov.

## STATE OF NEW YORK

## DEPARTMENT OF STATE

Certificate of Status

I, ROBERT J. RODRIGUEZ, Secretary of State of the State of New York and custodian of the records required by law to be filed in my office, do hereby certify that upon a diligent examination of the records of the Department of State, as of the date and time of this certificate, the following entity information is reflected:

Entity Name: DOS ID Number: Entity Type: Entity Status: Date of Initial Filing with DOS:

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Statement Status: Statement Due Date: ENGIE POWER & GAS LLC 3097702 DOMESTIC LIMITED LIABILITY COMPANY EXISTING 09/02/2004

No information is available from this office regarding the financial condition, business activity or practices of this entity.

CURRENT

09/30/2024

PRIMENT OF

WITNESS my hand and official seal of the Department of State. at the City of Albany, on October 08, 2022 at 01:06 P.M.

ROBERT J. RODRIGUEZ, Secretary of State

Brandon C. Hughan

By Brendan C. Hughes Executive Deputy Secretary of State

Authentication Number: 100002316492 To Verify the authenticity of this document you may access the Division of Corporation's Document Authentication Website at <u>http://ecorp.dos.ny.gov</u> State of Rhode Island 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,

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:

October 28, 2022 11:35 AM

Tulli U. Kole

Nellie M. Gorbea Secretary of State

