

**State of Rhode Island
Department of State - Business Services Division****Application for Registration**

FOREIGN Limited Liability Company

→ Filing Fee: \$150.00

REC'D RIDOS BSD
24 JUL 31 PM 12:14:37

Pursuant to the provisions of RIGL 7-16-49, 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:			
Solar Landscape Origination LLC			
Is this company organized in its state or country of formation as a low-profit limited liability company? 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 Jersey			
3. The date of its organization is:			
June 3, 2019			
And the period of its duration is: CHECK ONE BOX ONLY			
☒ Perpetual (on-going)			
☐ Date certain for dissolution _____			
4. The name and address of the resident agent/office in Rhode Island is:			
Agent Name			
Cogency Global Inc.			
Street Address (NOT a P.O. Box)			
222 Jefferson Boulevard			
City/Town	State	Zip Code	
Warwick	RHODE ISLAND	02888	
5. The purpose or purposes which it proposes to pursue in the transaction of business in Rhode Island are:			
Development of solar photovoltaic projects			
Check the box 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

MS STAFF 2/14
FILED
JUL 31 2024
BY 30496

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:

601 Bangs Avenue, Asbury Park, New Jersey 07712

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

Same as above

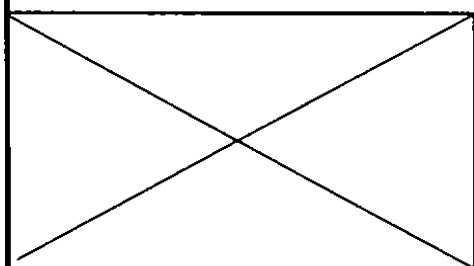
9. Management of the Limited Liability Company: **CHECK ONE BOX ONLY**

☐ Members (Owners)

DO NOT complete the chart below.

OR

☒ Manager(s). Complete the chart below.

	MANAGER(S) NAME	ADDRESS
	Shaun Keegan, CEO	601 Bangs Avenue, Asbury Park, New Jersey 07712

Check the box to indicate an attachment ☐

10. This application must be accompanied by a Certificate of Good Standing/Letter of Status 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 90 days from the date of filing) _____

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

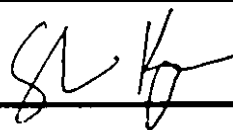
Solar Landscape Origination LLC

Date

July 23, 2024

Signature of Authorized Person

Shaun Keegan



**STATE OF NEW JERSEY
DEPARTMENT OF THE TREASURY
DIVISION OF REVENUE AND ENTERPRISE SERVICES
SHORT FORM STANDING**

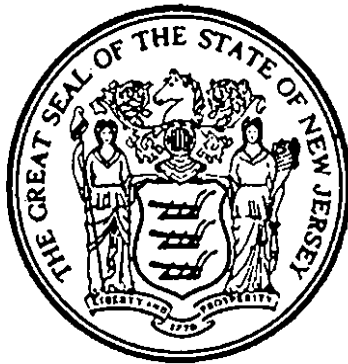
SOLAR LANDSCAPE ORIGATION LLC
0450386464

I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic Limited Liability Company was registered by this office on June 03, 2019.

As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.

I further certify that the registered agent and office are:

SHAUN KEEGAN
522 COOKMAN AVE
APT 3
ASBURY PARK, NJ 07712



*IN TESTIMONY WHEREOF, I have
hereunto set my hand and affixed
my Official Seal at Trenton, this
22nd day of July, 2024*

Elizabeth Maher Muoio
State Treasurer

Certificate Number : 6155495948

Verify this certificate online at

https://www1.state.nj.us/TYTR_StandingCert/JSP/Verify_Cert.jsp



State of Rhode Island

Department of State | Office of the Secretary of State

Gregg M. Amore, *Secretary of State*

I, GREGG M. AMORE, 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:

July 31, 2024 12:14 PM

A handwritten signature in black ink, reading "Gregg M. Amore". The signature is written in a cursive style.

Gregg M. Amore
Secretary of State

