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Michael G. Adams COMMONWEALTH OF KENTUCKY Kentucky Secretary of State MICHAEL G. ADAMS, SECRETARY OF STATE Received and Filed: 5/20/2022 10:53 AM **Division of Business Filings** Certificate of Authority Fee Receipt: \$90.00 P.O. Box 718 (Foreign Business Entity) Frankfort, KY 40602 (502) 564-3490 www.sos.ky.gov Pursuant to the provisions of KRS 14A - 030 the undersigned hereby applies for authority to transact business in Kentucky on behalf of the entity named below and, for that purpose, submits the following statements: 1. The entity is a: profit corporation nonprofit corporation professional limited liability company business trust limited liability company statutory trust limited partnership Itd cooperative association other non-profit llc professional service corporation 2. The name of the entity is ENGIE North America Inc. (The name must be identical to the name on record with the Secretary of State.) 3. The name of the entity to be used in Kentucky is (if applicable) (Only provide if "real name" is unavailable for use; otherwise, leave blank.) Delaware 4. The state or country under whose law the entity is organized is 5. The date of organization is 11/12/2015 and the period of duration is (If left blank, duration is considered perpetual.) 6. The mailing address of the entity's principal office is 1360 Post Oak Blvd., Suite 400 Houston TХ 77056 Street Address City State Zip Code The street address of the entity's registered office in Kentucky is 828 Lane Allen Rd Ste 219 40504 Lexington KY Street Address (No P.O. Box Numbers) Citv State Zip Code and the name of the registered agent at that office is Capitol Corporate Services, Inc. 8. The names and business addresses of the entity's representatives (secretary, officers and directors, managers, trustees or general partners); William W. Davis 1360 Post Oak Blvd., Suite 400 Houston ТΧ 77056 Name Street or P.O. Box State Zip Code City David Carroll 1360 Post Oak Blvd., Suite 400 Houston 77056 ТΧ Street or P.O. Box Name City State Zip Code Stefaan Sercu 1360 Post Oak Blvd., Suite 400 Houston 77056 TX Street or P.O. Box Name City State Zip Code 9. If a professional service corporation, all the individual shareholders, not less than one half (1/2) of the directors, and all of the officers other than the secretary and treasurer are licensed in one or more states or territories of the United States or District of Columbia to render a professional service described in the statement of purposes of the corporation, 10. I certify that, as of the date of filing this application, the above-named entity validly exists under the laws of the jurisdiction of its formation. 11. If a limited partnership, it elects to be a limited liability limited partnership. Check the box if applicable: 12. If a limited liability company, check box if manager-managed: 13 This application will be effective upon filing. William W. Davis William W. Davis, Secretary 05/19/2022 Signature of Authorized Representative **Printed Name & Title** Date L Capitol Corporate Services, Inc. consent to serve as the registered agent on behalf of the business entity, Type/Print Name of Registered Agent Sadi Bovette Assistant Secretary Sach Bou Ignature of Registered Age 5/20/2022 **Printed Name** Title Date