

Commonwealth of Kentucky
Michael G. Adams, Secretary of State

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Michael G. Adams
KY Secretary of State
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Michael G. Adams
Secretary of State
P. O. Box 718
Frankfort, KY 40602-0718
(502) 564-3490
<http://www.sos.ky.gov>

Certificate of Authority

FBE

Pursuant to the provisions of KRS 14A.9 - 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 business entity is a **limited liability company**.
2. The name of the entity is: **TOP TIER SOLAR SOLUTIONS LLC**
3. The name of the entity to be used in Kentucky is (if applicable): **N/A**
4. The state or country whose law the entity is organized is **South Carolina**.
5. The date of organization is **11/20/2018** and the period of duration is **perpetual**.
6. This entity is managed by Members

7. Principal Office

1530 Center Park Drive
Charlotte, NC 28217

8. Required Representatives

Member	Jacob Van Wynyen	1530 Center Park Drive	Charlotte	NC	28217
Member	Samuel Van Wynyen	1530 Center Park Drive	Charlotte	NC	28217

9. Registered Agent/Office

Kentucky Registered Agents LLC
Jacob Van Wynyen
212 N 2nd Street
Suite 100
Richmond, KY 40475

I, **Jacob Van Wynyen**, consent to sign for **Kentucky Registered Agents LLC** who serves as the **Registered Agent** on behalf of this Entity.
on Monday, March 27, 2023

As the Authorized Representative, I, **Jacob Van Wynyen**, declare under penalty of perjury under the laws of the state of Kentucky that the foregoing is true and correct. Title: **Member**