

# State of Idaho

Office of the Secretary of State

## CERTIFICATE OF AUTHORITY

OF

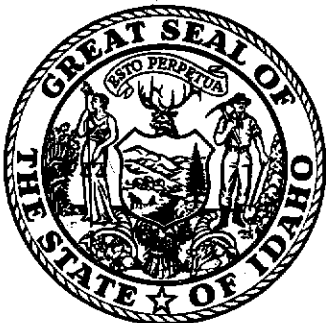
SE HAZELTON A, L.P.

File Number L 6485

I, BEN YSURSA, Secretary of State of the State of Idaho, hereby certify that an Application for Certificate of Authority, duly executed pursuant to the provisions of the Idaho Limited Partnership Act, has been received in this office and is found to conform to law.

ACCORDINGLY and by virtue of the authority vested in me by law, I issue this Certificate of Authority to transact business in this State and attach hereto a duplicate of the Application.

Dated: December 9, 2010



*Ben Yursa*

SECRETARY OF STATE

By

*[Signature]*



# APPLICATION FOR CERTIFICATE OF AUTHORITY FOR FOREIGN LIMITED PARTNERSHIP

(Instructions on back of application)

2010 DEC -9 AM 9:23

SECRETARY OF STATE  
STATE OF IDAHO

The undersigned limited partnership applies for a Certificate of Authority and states as follows:

1. The name of the limited partnership is:

SE Hazelton A, L.P.

2. The name which it shall use in Idaho is: SE Hazelton A, L.P.

3. It is formed under the laws of: California and its date of formation is November 22, 1985

4. The address of the office located in its jurisdiction of domicile:

Street: 20020 Tamarack Rd., Burney, CA 96013

Mailing: \_\_\_\_\_

5. The address of its principal office (if different than item 4):

Street: One Tech Drive, Suite 220, Andover, MA 01810

Mailing: \_\_\_\_\_

6. The address to which correspondence should be addressed (if different than item 5):

Mailing: \_\_\_\_\_

7. The name and physical street address of the registered agent in Idaho is:

CT Corporation System, 1111 W Jefferson St Suite 530 Boise ID 83702

8. This limited partnership [ ☐ is ] [ ☒ is not ] a limited liability limited partnership.

9. The names and respective business and mailing addresses of its general partners:

Name	Street Address	Mailing Address
<u>Bypass Power Company</u>	<u>One Tech Drive, Suite 220</u> <u>Andover, MA 01810</u>	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Dated: December 6, 2010

Signature: *Victor Engel*

Typed Name: Victor Engel

Capacity: Vice President, Bypass Power Company

*The signer must be a general partner of the limited partnership.*

Customer Acct # :

(if using pre-paid account)

Secretary of State use only

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foreign.lp.pdf Revised 11/2010

IDAHO SECRETARY OF STATE  
12/09/2010 05:00  
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L 6485

**State of California**  
**Secretary of State**

**CERTIFICATE OF STATUS**

**ENTITY NAME:** SE HAZELTON A, L.P.

**FILE NUMBER:** 198532600046  
**FORMATION DATE:** 11/22/1985  
**TYPE:** DOMESTIC LIMITED PARTNERSHIP  
**JURISDICTION:** CALIFORNIA  
**STATUS:** ACTIVE (GOOD STANDING)

I, DEBRA BOWEN, Secretary of State of the State of California, hereby certify:

The records of this office indicate the entity is authorized to exercise all of its powers, rights and privileges in the State of California.

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



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of December 7, 2010.

*Debra Bowen*

**DEBRA BOWEN**  
**Secretary of State**