

FILED 04/06/22 04:59 PM **A2204004**

APPENDIX G

CERTIFICATES OF FORMATION AND CERTIFICATE OF QUALIFICATION TO DO BUSINESS IN CALIFORNIA

The First State

Delaware

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "LS POWER GRID CALIFORNIA, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE FIRST DAY OF MARCH, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "LS POWER GRID CALIFORNIA, LLC" WAS FORMED ON THE FIFTEENTH DAY OF AUGUST, A.D. 2008.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

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SR# 20191685691



Jeffrey W. Bullock, Secretary of State

Authentication: 202357007 Date: 03-01-19

You may verify this certificate online at corp.delaware.gov/authver.shtml

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Page 1



The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF AMENDMENT OF "CALIFORNIA TRANSMISSION DEVELOPMENT, LLC", CHANGING ITS NAME FROM "CALIFORNIA TRANSMISSION DEVELOPMENT, LLC" TO "LS POWER GRID CALIFORNIA, LLC", FILED IN THIS OFFICE ON THE TWENTY-EIGHTH DAY OF FEBRUARY, A.D. 2019, AT 12:37 O`CLOCK P.M.



Authentication: 202351089 Date: 03-01-19

Page 1

4588352 8100 SR# 20191569171

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State of Delaware Secretary of State Division of Corporations Delivered 12:37 PM 02/28/2019 FILED 12:37 PM 02/28/2019 SR 20191569171 - File Number 4588352

STATE OF DELAWARE SR 2 CERTIFICATE OF AMENDMENT

- 1. Name of Limited Liability Company: California Transmission Development, LLC
- 2. The Certificate of Formation of the limited liability company is hereby amended as follows:

The new name of the Company is LS Power Grid California, LLC

IN WITNESS WHEREOF, the undersigned have executed this Certificate on the $\frac{28\text{th}}{\text{day of } \frac{\text{February}}{\text{day of } \frac{2019}{\text{c}}}$.

By: Michel

Authorized Person(s)

Name: Michelle Genieczko

Print or Type

Delaware

PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF FORMATION OF "CALIFORNIA TRANSMISSION DEVELOPMENT, LLC", FILED IN THIS OFFICE ON THE FIFTEENTH DAY OF AUGUST, A.D. 2008, AT 12:23 O'CLOCK P.M.



4588352 8100

080876299

You may verify this certificate online at corp.delaware.gov/authver.shtml

Harriet Smith Windson

Harriet Smith Windsor, Secretary of State AUTHENTICATION: 6796849

DATE: 08-18-08

CERTIFICATE OF FORMATION

OF

CALIFORNIA TRANSMISSION DEVELOPMENT, LLC

The undersigned, an authorized natural person, for the purpose of forming a limited liability company under the provisions and subject to the requirements of the Delaware limited Liability Company Act, hereby certifies that:

1. **Name.** The name of the limited liability company is

CALIFORNIA TRANSMISSION DEVELOPMENT, LLC

2. <u>Registered Office</u>. The address of the registered office of the Company in the State of Delaware is c/o The Corporation Trust Company, 1209 Orange Street, Wilmington, County of New Castle, Delaware 19801.

3. <u>**Registered Agent.**</u> The name and address of the registered agent for service of process on the Company in the State of Delaware is c/o The Corporation Trust Company, 1209 Orange Street, Wilmington, County of New Castle, Delaware 19801.

IN WITNESS WHEREOF, the undersigned has executed this Certificate of Formation of CALIFORNIA TRANSMISSION DEVELOPMENT, LLC this 15th day of August 2008.

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By:_____ David J. Sass, Organizer

State of California Secretary of State

CERTIFICATE OF REGISTRATION

I, ALEX PADILLA, Secretary of State of the State of California, hereby certify.

That on the **1ST** day of **MARCH**, **2019**, **LS POWER GRID CALIFORNIA**, **LLC**, complied with the requirements of California law in effect on that date for the purpose of registering to transact intrastate business in the State of California; and further purports to be a limited liability company organized and existing under the laws of **DELAWARE** as **LS POWER GRID CALIFORNIA**, **LLC** and that as of said date said limited liability company became and now is duly registered and authorized to transact intrastate business in the State of California, subject, however, to any licensing requirements otherwise imposed by the laws of this State.

IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of March 4, 2019.



ALEX PADILLA Secretary of State

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	Secretary of State		LLC-5	0040000			a .a .e.	~ 1	
	Application to Register a Fo Liability Company (LLC)	reign l				90631004 FILED CSP etary of State			
IMPORTANT	Read Instructions before completing this	s form.			State o	of Califor	nia		
Must be submitte government ager	MAR - 1 2019 gr								
Filing Fee –	\$70.00								
	First page \$1.00; each attachment page \$0 Certification Fee - \$5.00	.50;							
Note: Registered California Franci https://www.ftb.ca	LLCs in California may have to pay minir hise Tax Board each year. For more a.gov.	num \$800 informat) tax to the tion, go to	Icc This	Space For	Office	Jse Onl	у	
1a. LLC Name	(Enter the exact name of the LLC as listed on yo	ur attached	d Certificate of G	ood Standing.)					
LS Power Grid	California, LLC								
the Colliferation				noto nome if the l	l O nome in 1			California	
1b. California /	Alternate Name, If Required (See Instru	ctions - Or	niy enter an alteri	nate name if the t	LC name in 1	ra not ava	allable in	California	
2. LLC Histor	y (See Instructions – Ensure that the formation of	date and iu	risdiction match t	he attached Cert	ficate of Good	d Standin	g.)		
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-	ment (Do not alter Authority Statement) ntly has powers and privileges to condu	of huning	oog in the stat	o forolan oou	ntry or plac	o ontor	od in Ite		
	ddresses (Enter the complete business add				ox or "in care	of" an ind	-1		
	Principal Executive Office - Do not enter a P.O. Box	C	City (no abbrevi	·		State	Zip Code		
One Tower Cen	ter Blvd., FL 21		East Brunsw	wick		NJ	08816		
b. Street Address of	Principal Office in California, if any - Do not enter a	a P.O. Box City (no abbrev		iations)		State	Zip Co	de	
						CA			
c. Mailing Address of	Principal Executive Office, if different than item 3	a	City (no abbreviations)			State	Zip Code		
]						
	Process (Must provide either Individual OR Co	nmoration)	<u>، </u>		I		I		
	Complete Items 4a and 4b only. Must include a			nia street address	1 .				
	First Name (if agent is not a corporation)		Middle Name		t Name			Suffix	
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h Street Address /if	agent is not a corporation) - Do not enter a P.O. Bo	ox	City (no abbrevi	ations)		State	Zip Co	L de	
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			L			~~	I		
	N - Complete Item 4c only. Only include the nar								
-	ed Corporate Agent's Name (if agent is a corporatio					0 - 1			
Corporation Ser	vice Company Which Will Do Business	s In Califo	ornía As CSC	- Lawyers Inc	orporating	Service)		
e									
	Sign Below (See Instructions. Title not req	juirea.)							
I am authorized	to sign on behalf of the foreign LLC.								
	/14 /								
1 holl									
POVIC	A			J. Sass or Print Name					

Signature

LLC-5 (REV 01/2017)

The First State

Delaware

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "LS POWER GRID CALIFORNIA, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE FIRST DAY OF MARCH, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "LS POWER GRID CALIFORNIA, LLC" WAS FORMED ON THE FIFTEENTH DAY OF AUGUST, A.D. 2008.

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SR# 20191685691



Jeffrey W. Bullock, Secretary of State

Authentication: 202357007 Date: 03-01-19

You may verify this certificate online at corp.delaware.gov/authver.shtml

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Page 1



I hereby cartify that the foregoing transcript of ______ page(s) is a full, true and correct copy of the original record in the custody of the California Secretary of State's office.

MAR 0, 4 2019 54 Date: 20. 000 ALEX PADILLA, Secretary of State

Secretary of State	I	LLC-12		21-A99597					
Statement of Information (Limited Liability Company)		FILED							
IMPORTANT — Read instructions before completing this form.				In the office of the Secretary of State of the State of California					
Filing Fee – \$20.00									
				FEB 22, 2021					
Copy Fees – First page \$1.00; each attachment page \$0 Certification Fee - \$5.00 plus copy fees		This Space For Office Use Only							
1. Limited Liability Company Name (Enter the exact name of the	LLC. If you	registered in Califor				, y			
LS POWER GRID CALIFORNIA, LLC									
2. 12-Digit Secretary of State File Number	3. State,	Foreign Countr	y or Place o	of Organization (only if for	rmed out	side of C	California)		
201906310046	DELAV	VARE							
4. Business Addresses									
a. Street Address of Principal Office - Do not list a P.O. Box 1 Tower Center Blvd 21st Floor	City (no abbreviations) East Brunswick			State NJ	Zip Co 0881				
b. Mailing Address of LLC, if different than item 4a		City (no abbreviations)			State	Zip Co			
1 Tower Center Blvd 21st Floor				East Brunswick			08816		
c. Street Address of California Office, if Item 4a is not in California - Do not list	a P.O. Box	City (no abbreviat	ions)		State CA				
 Manager(s) or Member(s) If no managers have been appoint must be listed. If the manager/mean entity, complete Items 5b and has additional managers/member 	ember is an i 5c (leave Iter	ndividual, complete m 5a blank). Note:	Items 5a and The LLC car	l 5c (leave Item 5b blank). Inot serve as its own manag	st one na If the ma	inager/m	nember is		
a. First Name, if an individual - Do not complete Item 5b	Middle Name		Last Name			Suffix			
b. Entity Name - Do not complete Item 5a LSP Transmission Holdings, LLC									
c. Address 1 Tower Center Blvd 21st Floor	City (no abbreviat East Brunsv				Zip Co 0881				
6. Service of Process (Must provide either Individual OR Corporation	,								
INDIVIDUAL – Complete Items 6a and 6b only. Must include agent a. California Agent's First Name (if agent is not a corporation)	's full name a	nd California street Middle Name	address.	Last Name			Suffix		
				Last Name			Sullix		
b. Street Address (if agent is not a corporation) - Do not enter a P.O. Box		City (no abbreviations)			State CA	Zip Co	de		
CORPORATION – Complete Item 6c only. Only include the name of		5	on.						
c. California Registered Corporate Agent's Name (if agent is a corporation) – D CORPORATION SERVICE COMPANY WHICH WILL DO BUSI (C1592199)			S CSC - LA	WYERS INCORPORAT	ING SE	RVICE			
7. Type of Businessa. Describe the type of business or services of the Limited Liability Company									
Operation of transmission lines									
8. Chief Executive Officer, if elected or appointed		-							
a. First Name		Middle Name	Last Name				Suffix		
b. Address		City (no abbreviat	ions)		State	Zip Co	de		
9. The Information contained herein, including any attachm	ents, is tru	e and correct.			1				
02/22/2021 Mark Brennan		Treasurer							
Date Type or Print Name of Person Completing th	ne Form		Title	Signature	9				
Return Address (Optional) (For communication from the Secretary of					iment en	er the n	ame of a		
person or company and the mailing address. This information will become p	public when fi	ied. SEE INSTRU(JIONS BEF	DRE COMPLETING.)					
Name:		I							
Company:									
Address:									
City/State/Zip:		L							