

Delaware

The First State

PAGE RECEIVED

OCT 05 2011

PUBLIC SERVICE COMMISSION

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THE ATTACHED ARE TRUE AND CORRECT COPIES OF ALL DOCUMENTS ON FILE OF "WILTON WIND IV, LLC" AS RECEIVED AND FILED IN THIS OFFICE.

THE FOLLOWING DOCUMENTS HAVE BEEN CERTIFIED:

CERTIFICATE OF FORMATION, FILED THE FIRST DAY OF JUNE, A.D. 2011, AT 10:38 O'CLOCK A.M.

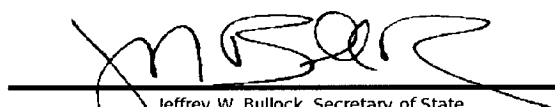
AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID CERTIFICATES ARE THE ONLY CERTIFICATES ON RECORD OF THE AFORESAID LIMITED LIABILITY COMPANY, "WILTON WIND IV, LLC".

4990149 8100H

111064596

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




Jeffrey W. Bullock, Secretary of State
AUTHENTICATION: 9068362

DATE: 10-03-11

1 PU-11-647 Filed: 10/5/2011 Pages: 4
Corporate papers

State of Delaware
Secretary of State
Division of Corporations
Delivered 11:01 AM 06/01/2011
FILED 10:38 AM 06/01/2011
SRV 110667930 - 4990149 FILE

STATE of DELAWARE
LIMITED LIABILITY COMPANY
CERTIFICATE of FORMATION

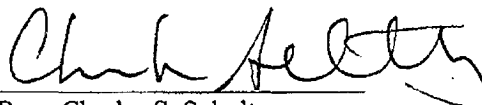
The undersigned, an authorized natural person, for the purpose of forming a limited liability company under the provisions and subject to the requirements of the laws of the State of Delaware (including Chapter 18, Title 6 of the Delaware Code and the acts amendatory thereof and supplemental thereto, and known, identified, and referred to as the "Delaware Limited Liability Company Act"), hereby certifies that:

FIRST: The name of the limited liability company (hereinafter called the "limited liability company") is **Wilton Wind IV, LLC**.

SECOND: The address of the registered office and the name and address of the registered agent of the limited liability company required to be maintained by Section 18-104 of the Delaware Limited Liability Company Act are:

The Corporation Trust Company
1209 Orange Street
Wilmington, DE 19801

Executed this day, **June 1, 2011**.



By: Charles S. Schultz
An Authorized Person



STATE OF NORTH DAKOTA
Office of Secretary of State

I hereby certify that this is a true and correct copy, consisting of 1 pages as taken from the original on file in this office. Originality of this certification can be determined by the color red.

DATED: 10-3-11

BY: [Signature]

Alvin A. Jaeger
Alvin A. Jaeger
SECRETARY OF STATE



**CERTIFICATE OF AUTHORITY
FOREIGN LIMITED LIABILITY COMPANY
APPLICATION**
SECRETARY OF STATE
SFN 19381 (07-2008)

JUN 03 2011

Sec. of State

FOR OFFICE USE ONLY

ID Number:	29,175,700 FLC
WO Number:	188994
Filed:	6-15-11
By:	LS

JUN 14 2011

TYPE OR PRINT LEGIBLY SEE REVERSE SIDE FOR FEES, FILING AND MAILING INSTRUCTIONS

1. The application is accompanied by
- *Certificate of authority fee of \$135
 - *Current CERTIFICATE OF GOOD STANDING or CERTIFICATE OF EXISTENCE duly authenticated by the organizing officer of the state or country of organization.
 - Certification of professional license
 - Signed consent to use of name and fee of \$10
 - Trade name registration and fee of \$25

SEC. OF STATE

For reference, see North Dakota Century Code, Sections 10-31-01, 10-31-13.1, and 10-32-138

2. Identify type of limited liability company applying for certificate of authority		3. Federal ID Number	
<input checked="" type="checkbox"/> Foreign Business <input type="checkbox"/> Foreign Professional			
4. Name of limited liability company exactly as it appears on Certificate of Good Standing from state or country of origin WILTON WIND IV, LLC			
5. If applicable, provide the trade name and complete the Trade Name Registration form if the selected trade name is not already registered in North Dakota. Only provide the trade name in this line if: <ul style="list-style-type: none"> a) The limited liability company name is not in the form as required of limited liability companies in North Dakota. b) The Secretary of State has notified the limited liability company that its name is the same as or deceptively similar to a name already registered, and the limited liability company is unable to obtain consent to use of name from the previous filer or a certified copy of a final decree of a court of competent jurisdiction establishing prior right of this limited liability company to use of the name in North Dakota. c) The limited liability company does not wish to use or protect its name in North Dakota and chooses to use a name other than its limited liability company name. 			
6. Complete address of executive office: (Street/RR, PO Box, City, State, Zip+4) which may not only be a post office box number 700 Universe Boulevard, Juno Beach, FL 33408			
7. State or country where organized Delaware	8. Date when limited liability company will expire in state or country of origin: (month, day, year) or indicate "perpetual". Perpetual	9. Telephone Number	10. Toll-free telephone Number N/A
11.A. Name of <u>commercial</u> registered agent in North Dakota C T Corporation System		11.B. Name of <u>noncommercial</u> registered agent in North Dakota N/A	
11.C. Address of <u>noncommercial</u> registered agent in North Dakota: (Street/RR, PO Box, City, State, Zip+4) May not be only a post office box. N/A			
12. Nature of business or activities the limited liability company intends to conduct in the State of North Dakota Construct and operate a wind farm in North Dakota.			
13. MANAGERS AND GOVERNORS OF THE LIMITED LIABILITY COMPANY OF NORTH DAKOTA			
MANAGERS	Check box if manager and serves as governor	Street/RR	COMPLETE MAILING ADDRESS PO Box, City, State, Zip+4
Managing Member	<input checked="" type="checkbox"/>	700 Universe Boulevard, Juno Beach, FL 33408	
Managing Member	<input type="checkbox"/>		
If needed, attach sheet to add names of additional managers or governors.			
14. The undersigned has read the foregoing application, knows the contents thereof, and believes the statements are true. I further authorize the Secretary of State to correct numbers 4, 7, 11A, and 11B if not correctly reflected.		Date:	
Signature: <i>Rita W. Costantino</i> Rita W. Costantino		06/01/2011	
15. Name of person to contact about this document Cherie A. Hanley	E-Mail Address	Daytime telephone number and extension, if any	