

Delaware

The First State

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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 FORMATION OF "BADGER WIND, LLC", FILED IN THIS OFFICE ON THE THIRTEENTH DAY OF JULY, A.D. 2017, AT 6:41 O`CLOCK P.M.



Jeffrey W. Bullock, Secretary of State

6476963 8100
SR# 20175229174

Authentication: 202892342
Date: 07-17-17

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**STATE of DELAWARE
LIMITED LIABILITY COMPANY
CERTIFICATE of FORMATION**

First: The name of the limited liability company is _____
Badger Wind, LLC

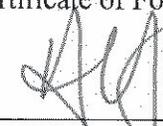
Second: The address of its registered office in the State of Delaware is _____
160 Greentree Drive, Suite 101 in the City of Dover
Zip code 19904. The name of its Registered agent at such address is
National Registered Agents, Inc.

Third: (Use this paragraph only if the company is to have a specific effective date of dissolution: "The latest date on which the limited liability company is to dissolve is _____.")

Fourth: (Insert any other matters the members determine to include herein.)

In Witness Whereof, the undersigned have executed this Certificate of Formation this

5 day of July, 2017.

By:  _____
Authorized Person (s)

Name: Declan Flanagan

State of Delaware
Secretary of State
Division of Corporations
Delivered 06:41 PM 07/13/2017
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