

# **Exhibit A**

## Certificate of Completion

Midwest Renewable Energy Association  
Educational Institute

Presented to

**Jason Johnson**

This certifies successful completion of the four day workshop

### Photovoltaic Installation Lab

*Chris LaForge, Instructor*

October 5 - 8, 2009

Approved by

  
Karen Blaha  
Training Network Coordinator  
Midwest Renewable Energy Association

## Certificate of Completion

Midwest Renewable Energy Association  
Educational Institute

Presented to

**Jason Johnson**

This certifies successful completion of the four day workshop

### Intermediate Photovoltaics

*Mike Joyce, Instructor*

October 3 - 4, 2009

Approved by

  
Karen Blaha  
Training Network Coordinator  
Midwest Renewable Energy Association

## Certificate of Completion

Midwest Renewable Energy Association  
Educational Institute

Presented to

**Jason Johnson**

This certifies successful completion of the four day workshop

### Basic Photovoltaics

*Kurt Nelson, Instructor*

September 17, 2009

Approved by

  
Karen Blaha  
Training Network Coordinator  
Midwest Renewable Energy Association

## Certificate of Completion

Midwest Renewable Energy Association  
Educational Institute

Presented to

**Jason Johnson**

This certifies successful completion of the four day workshop

### Advanced Photovoltaics Installation

*Mike Troge, Instructor*

July 12 - 15, 2010

Approved by

  
Karen Blaha  
Training Network Coordinator  
Midwest Renewable Energy Association

GENERAL AFFIDAVIT

State of ~~Illinois~~ Wisconsin  
County of Waupaca

BEFORE ME, the undersigned Notary, Jeanne M. Sharp  
[name of Notary before whom affidavit is sworn], on this 30th [day of month]  
day of April [month], 2015, personally appeared  
Jason M. Johnson [name of affiant], known to me to be a  
credible person and of lawful age, who being by me first duly sworn, on His [his or her]  
oath, deposes and says:

Jason Johnson has successfully completed and interconnected 5 (five) solar electric system installations.

Systems are operating as designed successfully.

[set forth affiant's statement of facts]

J. Johnson  
[signature of affiant] Jason Johnson

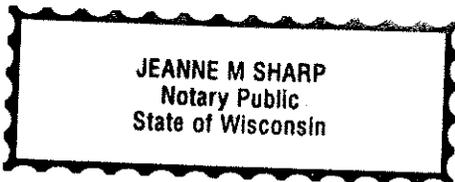
Jason Johnson  
[typed name of affiant]

E2614 Bags Hill Rd.  
[address of affiant, line 1]

Waupaca, WI 54981  
[address of affiant, line 2]

Subscribed and sworn to before me, this 30<sup>th</sup> [day of month] day of  
April [month], 2015.

[Notary Seal:]



Jeanne M. Sharp  
[signature of Notary]

Jeanne M. Sharp  
[typed name of Notary]

NOTARY PUBLIC

My commission expires:  
12/13, 2015.

## “Qualified Person’s”

Satisfactory completion of the installation of at least 5 DG facilities.

### Photovoltaic Installations

Ken & Rose Beyer  
315 W. Main Street  
Mt. Horeb, WI 53572

John Kubichek  
W2938 Hwy 64  
Marinette, WI 54143

Daniel Fassett  
1121 N. Park Ridge  
Princeville, IL

David Moran  
17328 G Drive North  
Marshall, MI 49068

Paul Moore  
3075 Lake Shore Rd  
Lexington, MI 48450



## OFFICE OF THE SECRETARY OF STATE

---

JESSE WHITE • Secretary of State

APRIL 20, 2015

0526303-4

JASON M JOHNSON  
931 W 31ST ST  
CHICGO, IL 60608-0000

RE SOLAR ONE LLC

DEAR SIR OR MADAM:

IT HAS BEEN OUR PLEASURE TO APPROVE YOUR REQUEST TO TRANSACT BUSINESS IN THE STATE OF ILLINOIS. ENCLOSED PLEASE FIND THE APPROVED APPLICATION FOR ADMISSION.

PLEASE NOTE! THE LIMITED LIABILITY COMPANY MUST FILE AN ANNUAL REPORT PRIOR TO THE FIRST DAY OF THIS MONTH OF QUALIFICATION NEXT YEAR. FAILURE TO TIMELY FILE WILL RESULT IN A \$300 PENALTY AND/OR REVOCATION. A PRE-PRINTED ANNUAL REPORT WILL BE MAILED TO THE REGISTERED AGENT AT THE ADDRESS ON OUR RECORDS APPROXIMATELY 45 DAYS BEFORE THE DUE DATE.

MANY OF OUR SERVICES ARE AVAILABLE AT OUR CONTINUOUSLY UPDATED WEBSITE. VISIT [WWW.CYBERDRIVEILLINOIS.COM](http://WWW.CYBERDRIVEILLINOIS.COM) TO VIEW THE STATUS OF THIS COMPANY, PURCHASE A CERTIFICATE OF GOOD STANDING, OR EVEN FILE THE ANNUAL REPORT REFERRED TO IN THE EARLIER PARAGRAPH.

SINCERELY YOURS,

JESSE WHITE  
SECRETARY OF STATE  
DEPARTMENT OF BUSINESS SERVICES  
LIMITED LIABILITY DIVISION  
(217) 524-8008

Form **LLC-45.5**

May 2012

Secretary of State  
Department of Business Services  
Limited Liability Division  
501 S. Second St., Rm. 351  
Springfield, IL 62756  
217-524-8008  
www.cyberdriveillinois.com

Illinois  
Limited Liability Company Act  
**Application for Admission to  
Transact Business**



LC0015056

This space for use by Secretary of State.

Filing Fee: \$500

Penalty: \$

Approved:

FILE # 05263034

This space for use by Secretary of State.

**FILED**  
**APR 20 2015**

JESSE WHITE  
SECRETARY OF STATE

HAB

1. Limited Liability Company Name: SOLAR ONE LLC

2. Assumed Name: \_\_\_\_\_  
(This item is only applicable if the company name in item 1 is not available for use in Illinois, in which case form LLC 1.20 must be completed and submitted with this application.)

3. Jurisdiction of Organization: WISCONSIN

4. Date of Organization: SEP 24th 2014

5. Period of Duration: PERPETUAL  
(Enter Perpetual unless there is a Date of Dissolution provided in the agreement, in which case enter that date.)

6. Address of the Principal Place of Business: (P.O. Box alone or c/o is unacceptable.)

931 W. 31st

Number

Street

Suite #

CHICAGO

City

IL

State

60608

ZIP Code

7. Registered Agent: JASON M JOHNSON  
First Name Middle Name Last Name

Registered Office: 931 W. 31st St  
Number Street Suite #

(P.O. Box alone or c/o is unacceptable.)

Chicago

City

IL

60608

Zip Code

Note: The registered agent must reside in Illinois. If the agent is a business entity, it must be authorized to act as agent in this state.

8. If applicable, Date on which Company first conducted business in Illinois: \_\_\_\_\_

(continued on back)

9. Purpose(s) for which the Company is Organized and Proposes to Conduct Business in Illinois: The - Transaction of All Lawful Business For which limited liability Companies may be organized under Wisconsin LLC Act And As permitted under ILLINOIS LLC Act

10. The Limited Liability Company: (check one)

a.  is managed by the manager(s) (List names and addresses.)

JASON JOHNSON  
931 W. 31<sup>st</sup> ST  
CHICAGO IL 60608

b.  has management vested in the member(s) (List names and addresses.)

11. The Illinois Secretary of State is hereby appointed the agent of the Limited Liability Company for service of process under circumstances set forth in subsection (b) of Section 1-50 of the Illinois Limited Liability Company Act.

12. This application is accompanied by a Certificate of Good Standing or Existence, duly authenticated within the last 60 days, by the officer of the state or country wherein the LLC is formed.

13. The undersigned affirms, under penalties of perjury, having authority to sign hereto, that this application for admission to transact business is to the best of my knowledge and belief, true, correct and complete.

Dated: APRIL 20 2015  
Month, Day, Year

J. Johnson  
Signature

Jason Johnson Myr  
Name and Title (type or print)

If applicant is signing for a Company or other Entity, state Name of Company and indicate whether it is a member or manager of the LLC.

United States of America

State of Wisconsin



DEPARTMENT OF FINANCIAL INSTITUTIONS

Division of Corporate & Consumer Services

To All to Whom These Presents Shall Come, Greeting:

I, GEORGE PETAK, Administrator of the Division of Corporate and Consumer Services, Department of Financial Institutions, do hereby certify that

**SOLAR ONE LLC**

is a domestic corporation or a domestic limited liability company organized under the laws of this state and that its date of incorporation or organization is September 24, 2014.

I further certify that said corporation or limited liability company has not yet completed its initial report year and, accordingly, has not yet filed an annual report under ss. 180.1622, 180.1921, 181.1622 or 183.0120 Wis. Stats., and that said corporation or limited liability company has not filed articles of dissolution.



IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the official seal of the Department on April 20, 2015.

A handwritten signature in cursive script that reads "George Petak".

GEORGE PETAK, Administrator  
Division of Corporate and Consumer Services  
Department of Financial Institutions

DFI/Corp/33

**To validate the authenticity of this certificate**

Visit this web address: <http://www.wdfi.org/apps/ccs/verify/>