## **Annual Certification** for Renewable Energy Facility Registration

Docket No:

Docket No:	SP-5152 Sub 0	
Facility Owner:	ESA Henderson 2, LLC	
X YES NO	and rules for the protection of the enviro	apliance with all federal and state laws, regulations comment and conservation of natural resources
X YES NO	Renewable Energy Facility X Ne  and that the facility will be operated as a:  Renewable Energy Facility X Ne	
XYES NO	our RECs emanating from the same electricity renewable energy certificates (whether or not power supplier to comply with G.S. 62-133.8 resold for any other purpose, including another purchase of renewable energy certificates in other state or country, and that the electric p	production being tracked in NC-RETS; and 2) any of bundled with electric power) sold to an electric have not, and will not, be remarketed or otherwise er renewable energy portfolio standard or voluntary. North Carolina (such as NC GreenPower) or any power associated with the certificates will not be at the power is bundled with renewable energy.
X YES NO	I certify that I consent to the auditing of my organization's books and records by the Public Staff insofar as those records relate to transactions with North Carolina electric power suppliers, and agree to provide the Public Staff and the Commission access to our books and records, wherever they are located, and to the facility.	
X YES NO	I certify that the information provided is true and correct for all years that the facility has earned RECs for compliance with G.S. 62-133.8.	
X YES NO	I certify that I am the owner of the renewable energy facility or am duly authorized to act on behalf of the owner for the purpose of this filing.	
Lindsay	Amolh	Manager
Lindsay Herold		(Title)
(Name - Printed or Typed)	'IU	01/03/2017
(mine - i mieu or 1 ypeu)		(Date)

## **VERIFICATION**

STATE OF _	Florida	COUNTY OF	Seminole	
Lindsag	tlerold	, personally appeared b	pefore me this day and, being first	
duly sworn,	says that the facts st	ated in the foregoing applicat	ion and any exhibits, documents,	
and statements thereto attached are true as he or she believes.				
WITNESS my hand and notarial seal, this 3rd day of January , 20 17				
			J	
		My Commission Ex	pires: <u>Feb 24, 2020</u>	
Wh	L			
Signature of 1	Notary Public	VERONICA VER	FF 964128	
Veronica \	Valencia			

The name of the person who completes and signs the annual certification must be typed or printed by the notary in the space provided in the verification. The notary's name must be typed or printed below the notary's seal. This original verification must be affixed to the original annual certification, and a copy of this verification must be affixed to each of the 15 copies that are also submitted to the Commission at:

Name of Notary Public - Typed or Printed

Chief Clerk North Carolina Utilities Commission 4325 Mail Service Center Raleigh, North Carolina 27699-4325