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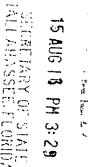
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PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
(Boodshell (Milliber)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
Special instructions to 1 ming Officer.				

Office Use Only



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FLORIDA DEPARTMENT OF STATE Division of Corporations

April 20, 2015

MARGARET KNIGHT 3380 BRECKSVILLE RD SUITE 200 RICHFIELD, OH 44286

SUBJECT: CONSTRUCTION LABOR CONTRACTORS, LLC

Ref. Number: W15000027480

We have received your document for CONSTRUCTION LABOR CONTRACTORS, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must contain the words "Limited Liability Company," the abbreviation "L.L.C.", or the designation "LLC". The following suffixes are no longer acceptable: "Limited Company," "L.C.," "LC.," "Ltd.," and "Co."

The registered agent must sign accepting the designation.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

COVER LETTER

TO:

Registration Section
Division of Corporations

	Nar	me of Limited Liability Company
		ability Company for Authorization to Transact Business in Florida," Certificate of above referenced foreign limited liability company to transact business in Florida.
Please return a	Il correspondence concerning this m	natter to the following:
	Margaret Knight - Director of Fi	
		Name of Person
	Construction Labor Contractors,	
	•	Firm/Company
	3380 Brecksville Road Suite 20	
		Address
	Richfield, OH 44286	0. 0. 12. 0.1
		City/State and Zip Code
	mknight@constructionlabor.com	s: (to be used for future annual report notification)
For further info	ormation concerning this matter, plea	ase call:
Marg	aret Knight	at (330) 247-1884
	Name of Contact Person	Area Code Daytime Telephone Number
Divisi Regis P.O. I	LING ADDRESS: ion of Corporations tration Section Box 6327 nassee, FL 32314	STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301
Enclosed is a	a check for the following amo	

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

Construction Labor Contractors, LLC	
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C" or "LLC.")	
Construction Labor Contractors	
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C," or "LLC.")	
2 Delaware 3.	
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)	
4. 06/23/2014	
(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)	
5. 3380 Brecksville Road Suite 200	
Richfield, OH 44286	
(Street Address of Principal Office)	
5. 3380 Brecksville Road. Suite 200	
Richfield, OH 44286	
(Mailing Address)	
7. The name, title or capacity and address of the person(s) who has/have authority to manage is/ars:	
Jeffrey B. Chesin CEO	
1090 River Laurel Drive	
Auwance, GA 30024	
8. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translate must be submitted)	
Signature of an authorized person In accordance with section 605,0203, F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are	tru
this accordance with section 605,0203, F.S., the execution of this document constitutes an artification under the periatries of perjuly that the facts state from aware that any false information submitted in a document to the Department of State constitutes a third degree fellony as provided for in \$ 817.155, F.S.)	

Typed or printed name of signee

Jeffrey B. Chesin

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name	of the Limited Liability Compa	any is:				
Construction L	ubor Contractors, LLC					
	e, the alternate to be used in the	state of Florida is:				
2. The name	and the Florida street address of	of the registered agent and office are:				
	C T Corporation System					
		(Name)				
	1200 South Pine Island Road					
	Florida Street Add	ress (P.O. Box NOT ACCEPTABLE)	SCOR			
	Plantation	F1, 33324	\$ 5 S			
liability comp	pany at the place designated in t	City/State/Zip To accept service of process for the above this certificate, I hereby accept the appo- ticity. I further agree to comply with the	intinent as 🐪 🕒			
statutes relati accept the ob	ing to the proper and complete p	performance of my duties, and I am fam tered agent as provided for in Chapter	iliur with and			
Statutes.		James M.	Halpin,			
	By: C T Corporation System	Assistant Assistant	Secretary			
	\$ 100.00 \$ 25.00 \$ 30.00 \$ 5.00	Filing Fee for Application Designation of Registered Agent Certified Copy (optional) Certificate of Status (optional)				

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY THAT "CONSTRUCTION LABOR

CONTRACTORS, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF

DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE NOT

HAVING BEEN CANCELLED OR REVOKED SO FAR AS THE RECORDS OF THIS

OFFICE SHOW AND IS DULY AUTHORIZED TO TRANSACT BUSINESS.

THE FOLLOWING DOCUMENTS HAVE BEEN FILED:

CERTIFICATE OF FORMATION, FILED THE TWELFTH DAY OF MAY, A.D. 2014, AT 4:34 O'CLOCK P.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID

CERTIFICATES ARE THE ONLY CERTIFICATES ON RECORD OF THE

AFORESAID LIMITED LIABILITY COMPANY, "CONSTRUCTION LABOR

CONTRACTORS, LLC".

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

5532046 8310

150734719

Jeffrey W. Bullock, Secretary of State

AUTHENT\(CATION: 2399112 \)

DATE: 05-21-15

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