# M2300002606

| (Requestor's Name)                      |  |  |  |  |  |
|---|--|--|--|--|--|
| (Address)                               |  |  |  |  |  |
| (Address)                               |  |  |  |  |  |
| (City/State/Zip/Phone #)                |  |  |  |  |  |
| PICK-UP WAIT MAIL                       |  |  |  |  |  |
| (Business Entity Name)                  |  |  |  |  |  |
| (Document Number)                       |  |  |  |  |  |
| Certified Copies Certificates of Status |  |  |  |  |  |
| Special Instructions to Filing Officer: |  |  |  |  |  |
|   |  |  |  |  |  |
|   |  |  |  |  |  |
|   |  |  |  |  |  |

Office Use Only



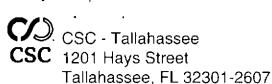
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2023 N.C. - 1 / THI 1: 0.9



S. ROBERTS

MAR - 2 2023



850-558-1500, Ext: 61592

To: Department Of State, Division Of Corporations

From: Alexxis Weiland-Sorenson

Ext: 61592 Date: 03/01/23 Order #: 538197-1

Re: New Stout Excavating Group Texas, LLC

Processing Method: Routine

## TO WHOM IT MAY CONCERN:

Enclosed please find:

Application for Certificate of Authority

Amount to be deducted from our State Account: \$125.00 - FL State Account Number:

12000000195

**AUTHORIZATION:** 

Please take the following action:

File in your office on basis

Issue Proof of Filing

Special Instructions:

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

### 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:

| New Stout Excavating   | Group Texas, LLC<br>Limited Liability Company, must include "Limite  | d Liability                   | Company ""LLC "or"LLC               | .,                  |            |        |
|--|--|-------------------------------|-------------------------------------|---------------------|------------|--------|
| (112112-021-01618)   | range rates my company, must institute training  | ~ ( 4401113                   | Company Talling Of The              | . ,                 |            |        |
| ance a very milable, anter alternate of  | name adopted for the purpose of transacting business in F  | logida The                    | alternate come must include "Limite | d Linkstitu Compone | "# I C" a  |        |
| Hatte Elwardinger, enjer aller de i  | mine adopted for the parpose of transacting dusmess in r   | IGHICA. THE L                 | micromic Hane most medice infinite  | a isamity Company   | ن را⊷امامل | of Liv |
| TEXAS  |  | י                             | 84-3460302                          |                     |            |        |
| (Jurisdiction under the law of which foreign limited liability company is organized) |  | 3.                            | (FEI number, if applicable)         |                     |            | _      |
| MARCH 19, 2022   |  |                               |                                     |                     |            |        |
|  | (Date first transpared business in Florida, if prior to<br>(See sections 605.0904 & 603.0905, F.S. to determ | registration<br>inc penulty : | .)<br>Pability)                     | <del></del>         |            |        |
| 2918 FM 1516<br>5.   |  | 6.                            | 800 S DOUGLAS RD, S                 |                     |            |        |
| reet Address of Principal Office)  |  | 0.                            | [Mailing Address]                   |                     |            |        |
| CONVERSE, TX 78109   |  |                               | CORAL GABLES, FL 33134              |                     |            |        |
|  |  | •                             |                                     |                     |            |        |
|  |  | •                             | . =                                 |                     | 207        | _      |
| Name and street addres   | ss of Florida registered agent: (P.O. Bo   | c <u>NOT</u> a                | ecceptable)                         |                     | 1023 KAR - |        |
| Nieman   | Corporation Service Company  |                               |                                     | 2.                  |            |        |
| Name:  |  |                               |                                     |                     | ΛH         |        |
| Office Address:  | 1201 Hays Street   |                               |                                     |                     | H: 09      | د      |
|  | Tallahassee  |                               | 32301<br>, Florida                  |                     | -          |        |
|  | (Cxy)  |                               | (Zrs cod                            | <del>-)</del>       |            |        |

#### Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this application. I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

> Corporation Service Company By: Alexand Mulad, A.V.P. (Registered agent's signature)

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

| Title or Capacity: | Name and Address:                | Title or Capacity: | Name and Address:         |
|--------------------|----------------------------------|--------------------|---------------------------|
| □Manager           | Name: MasTec North America, Inc. | □Manager           | Name: ROBERT E. APPLE     |
| ■Member            | Address: 800 S DOUGLAS RD        | □Member            | Address: 800 S DOUGLAS RD |
| □Authorized        | SUITE 1200                       | □Authorized        | SUITE 1200                |
| Person             | CORAL GABLES, FL 33134           | Person             | CORAL GABLES, FL 33134    |
| □Other             | Other                            | ■Other PRESIDEN    | TOther                    |
| □Manager           | Name: PABLO A. ALVAREZ           | □Manager           | Name: PAUL A. DIMARCO     |
| □Member            | Address: 800 S DOUGLAS RD        | □Member            | Address: 800 S DOUGLAS RD |
| □Authorized        | SUITE 1200                       | □Authorized        | SUITE 1200                |
| Person             | CORAL GABLES, FL 33134           | Person             | CORAL GABLES, FL 33134    |
| ■Other_EVP         |                                  | <b>∄</b> Other     | □Other                    |
| □Manager           | Name: DAVID L. KARIAN            | □Manager           | Name: ALBERTO DE CARDENAS |
| □Member            | Address:                         | □Member            | Address: 800 S DOUGLAS RD |
| □Authorized        | SUITE 1200                       | □Authorized        | SUITE 1200                |
| Person             | CORAL GABLES, FL 33134           | Person             | CORAL GABLES, FL 33134    |
| ■Other             | Other                            | ■Other_SECRETAL    | RY 🗆 Other                |

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

- 9. Attached is a 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. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)
- 10. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Signature of an authorized person

ALBERTO DE CARDENAS

Typed or printed name of signer

Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



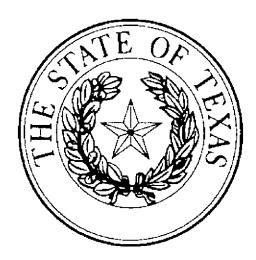
# Office of the Secretary of State

# Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for New Stout Excavating Group Texas, LLC (file number 804347629), a Domestic Limited Liability Company (LLC), was filed in this office on December 08, 2021.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on February 27, 2023.



gave Helson

Jane Nelson Secretary of State