# M23000008353

(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:					
_					
W230000 76028					

Office Use Only



300408682563

05/16/23--01025--029 \*\*160.00

2023 JUN 27 PM 3: 41



May 30, 2023

JACQUELINE GARCIA 3118 MCKEE FOREST COURT CHARLOTTE, NC 28216 US

SUBJECT: SS&S INSTALATIONS LLC Ref. Number: W23000076028

We have received your document for SS&S INSTALATIONS LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of your limited liability company is not available in the state of Florida since it is the same as, or it is not distinguishable from the name of an existing entity on our records. Therefore, the limited liability company must select an alternate name for use in the state of Florida.

Please insert the alternate name in the space provided on the application form.

The alternate name 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.," and "LC". The abbreviations "Ltd." and "Co.", also are no longer acceptable.

Please return 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.

Andrea Andrews Regulatory Specialist II

Letter Number: 423A00012278

RECEIVED
JUN 2 7 7073

#### **COVER LETTER**

TO:	Registration Section Division of Corporations					
SUBJE		&S INSTALLATIONS LLC				
30031		Name of Limited Liability Company				
		iability Company for Authorization to Transact Business in Florida," Certificate of above referenced foreign limited liability company to transact business in Florida				
Please	return all correspondence concerning this t	matter to the following:				
	J	JACQUELINE GARCIA				
		Name of Person				
	SS&S INSTALLATIONS LLC					
	Firm/Company					
	3118 MCKEE FOREST COURT					
	Address					
	CHARLOTTE, NC 28216					
	City/State and Zip Code					
	SSS.INSTALLATIONSLLC@GMAIL.COM					
	s: (to be used for future annual report notification)					
For fur	ther information concerning this matter, pl	lease call:				
	JACQUELINE GARCIA	973 932-7614 at ( )				
	Name of Contact Perso	n Area Code Daytime Telephone Number				
	Mailing Address:	Street Address:				
Registration Section		Registration Section				
	Division of Corporations	Division of Corporations				
	P.O. Box 6327	The Centre of Tallahassee 2415 N. Monroe Street, Suite 810				
	Tallahassee, FL 32314	Tallahassee, FL 32303				
	Enclosed is a check for the following arr Please make check payable to: FLORID \$125.00 Filing Fee \$130.00 File	DA DEPARTMENT OF STATE				

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

IN COMPLIANCE WITH SECTION 605.0002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED HABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF "LORIDA: SS&S INSTALLATIONS LEC (Name of Foreign Limited Liability Company; must include "Limited Liability Company;" "L.L.C.," or "LLC.") (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 "L.L.C," or "L.L.C." 474165207 NORTH CAROLINA (FEI number, if applicable) (Jurisdiction under the law of which foreign limited liability company is organized) 07/01 /2023 (Date first transacted business in Florida, if prior to registration.) (See sections 605,0904 & 605,0905, F.S. to determine penalty liability) 3118 MCKEE FOREST COURT 3118 MCKEE FOREST COURT (Mailing Address) (Street Address of Principal Office) **CHARLOTTE NC 28216** CHARLOTTE NC 28216 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) JACQUELINE GARCIA Name: 156 OWENSHIRE CIRCLE Office Address: KISSIMMEE (City) 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 shoutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position astregistered agent. 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:	· · · · · · · · · · · · · · · · · · ·
□Manager	Name:	□Manager	Name:
■Member	Address: 3118 MCKEE FOREST COUR	<b>⊞</b> Member	Address: 3118 MCKEE FOREST COUR
□Authorized	CHARLOTTE NC 28216	□Authorized	CHARLOTTE, NC 28216
Person		Person	
□Other	Other	□Other	Other
□Manager	Name:	□Manager	Name:
□Member	Address:	□Member	Address:
□Authorized		□Authorized	
Person		Person	
□Other	Other	□Other	Other
□Manager	Name:	□Manager	Name:
□Member	Address:	□Member	Address:
□Authorized		□Authorized	
Person		Person	
Other	Other	□Other	□Other
9. Attached is a cert jurisdiction under the of the translator mu 10. This document	Use an attachment to report more than six (6). The may be added to the index when filing your Floriticate of existence, no more than 90 days old, one law of which it is organized. (If the certificate st be submitted)  is executed in accordance with section 605.020 ment to the Department of State constitutes a the Signature of State constitutes as the signature of state co	duly authenticated by the is in a foreign language	e Annual Report form.  official having custody of records in the a translation of the certificate under oath.  I am aware that any false information
	JACQUELINE GARCIA		

Typed or printed name of signee



# NORTH CAROLINA Department of the Secretary of State

## CERTIFICATE OF AUTHORIZATION (Limited Liability Company)

I, ELAINE F. MARSHALL, Secretary of State of the State of North Carolina, do hereby certify that

### SS&S INSTALLATIONS LLC

is a limited liability company formed under the laws of New Jersey as SS&S INSTALLATIONS LLC and was authorized to transact business in the State of North Carolina by issuance of a certificate of authority on 19th day of April, 2017.

I FURTHER certify that, as of the date of this certificate, (i) the said limited liability company has not withdrawn from the State of North Carolina, (ii) the said limited liability company's certificate of authority has not been suspended for failure to comply with the Revenue Act of the State of North Carolina, (iii) that said limited liability company is not administratively revoked for failure to comply with the provisions of the North Carolina Limited Liability Company Act, (iv) that this office has not filed any decree of judicial revocation, withdrawal, articles of merger, or articles of conversion for said limited liability company.





Scan to verify online.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 11th day of May, 2023.

6 laine I. Marshall

Secretary of State