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JUN 1 0 2024 K. Brumbley CORPORATION SERVICE COMPANY 1201 Hays Street

XXXX QUALIFICATION (TYPE: LL)

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 466662 8451659

AUTHORIZATION : COST LIMIT : \$ 125 No.

ORDER DATE : May 13, 2024

ORDER TIME : 1:56 PM

ORDER NO. : 466662-002

CUSTOMER NO: 8451659

FOREIGN FILINGS

NAME: ABSTRACT CONCRETE ELEMENTS & SOLUTIONS LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Shauna Godbolt -- EXT#

EXAMINER:

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

	ements & Solutions LLC						
(Name of Foreign	Limited Liability Company; must include "Lii	mited Liability Co	mpany," "I, I, C ," or '	LI.C ")			
	name adopted for the purpose of transacting business	in Florida. The alteri	nate name must include "l	united Liability Company,	""L.1. C," or "El C "		
- <u>Del</u> aware		- ;			-		
Ourisdiction under the law of w	high foreign limited liability company is organized):	=		FEI number, if applicable)			
	(Date first translated business in Florida at our	tor to remeteuren l					
	(Date first transacted business in Florida, if pric (See sections 605,0904 & 605,0905; F.S. to de	nermine penalty liabi	uy)				
701 N Westshore Blvd			701 N Westshore Blvd				
treet Address of Principal Office)			(Mailing Address)				
Suite 210-300	Su	ite 210-300					
							
Tampa, FL 33609		Ta	mpa, FL 33609		2		
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Name and street addres	ss of Florida registered agent: (P.O. E	Box <u>NOT</u> accε	ptable)		ت ت		
					. <u>.</u>		
	Corporation Service Company						
Name:			_		F311: 34		
	1201 Hays Street				;; (2)		
Office Address:					Ţŗ.		
	Tallahassee		32301 . Florida				

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: Hacienda Stockton Trust □ Manager □Manager Name: 703 Stockton St ■Member Address: □Member Address: Brooksville, FL 34601-1033 .[]Authorized_.. _. <u>...</u> -- DAuthorized-□Other Other □Other_____ □Other □Manager Name: _____ □Manager Name: □ Member Address: ______ ☐Member Address: □ Authorized □ Authorized Person Person □Other_____ □Other_____ □Other_____ □Other □ Manager □ Manager Name: ☐ Member Address: ☐ Member Address: □ Authorized □ Authorized Person Person □Other____ □Other___ □Qther □Other_____ Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Nonindexed 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 Natasha Krisan

Typed or printed name of signee

466662-2

Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "ABSTRACT CONCRETE ELEMENTS & SOLUTIONS

LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS

IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF

THIS-OFFICE-SHOW, AS OF-THE TWENTY-FIRST-DAY OF-MAY, A.D. 2024.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ABSTRACT

CONCRETE ELEMENTS & SOLUTIONS LLC" WAS FORMED ON THE FOURTEENTH DAY

OF MAY, A.D. 2024.

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



Authentication: 203525693

Date: 05-21-24