

B09000000104

Florida Department of State
Division of Corporations
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Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850) 617-6383

RESUBMIT

Please give original submission date as file date.

From:

Account Name : CORPORATION SERVICE COMPANY
Account Number : 120000000195
Phone : (850) 521-1000
Fax Number : (850) 558-1575

FLORIDA/FOREIGN LP/LLLP

GEMINI CONSTRUCTION, LLLP

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$1,000.00

09 AUG -5 AM 10:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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RECEIVED
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S. HAWKES

AUG 6 2009

EXAMINER

Fax Server
850-617-6381

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Fax Server

August 4, 2009

CORPORATION SERVICE COMPANY

RESUBMIT
Please give original
submission date or file date.

SUBJECT: GEMINI CONSTRUCTION, LLLP
REF: W09000035334

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refile the complete document, including the electronic filing cover sheet.

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. Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of a foreign limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations. Therefore, the limited liability company must select an alternate name for use in the state of Florida. Also, please note that adding "of Florida" or "Florida" to the end of the name is not acceptable.

Please insert the alternate name in the space provided on the application form. You must also attach a copy of the written consent of the managers or managing members adopting the alternate name for Florida. For your convenience, we are enclosing a fill-in-the-blank form for you to complete and return to our office for processing.

The alternate name must end with the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The word "Limited" may be abbreviated as "Ltd." and the word "Company" may be abbreviated as "Co." The following suffixes are no longer acceptable limited liability company suffixes in Florida: "Limited Company," "L.C.," and "LC."

If you have any further questions concerning your document, please call (850) 245-6955.

Per Suzanne Wilson letter was to reject.

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850-617-6381

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Suzanne Hawkes
Regulatory Specialist II
Registration/Qualification Section

FAX Aud. #: H09000175040
Letter Number: 609A00026580

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPLICATION BY FOREIGN LIMITED PARTNERSHIP OR
LIMITED LIABILITY LIMITED PARTNERSHIP
TO TRANSACT BUSINESS IN FLORIDA

1. Gemini Construction, LLLP

(Name of Limited Partnership or Limited Liability Limited Partnership, which must include suffix)
Acceptable Limited Partnership suffixes: Limited Partnership, Limited, L.P., LP, or Ltd.
Acceptable Limited Liability Limited Partnership suffixes: Limited Liability Limited Partnership, L.L.L.P.
or LLLP.

GEMINI CONSTRUCTION OF GEORGIA, L.L.P.

(If name unavailable, name under which the limited partnership or limited liability limited partnership
proposes to register to transact business in Florida; must contain acceptable suffix.)

2. Georgia

(State or Country of Formation)

3. July 30, 2009

(Date of Formation)

4. Corporation Service Company

(Name of Registered Agent for Service of Process)

5. 1201 Hays Street

(Florida street address for Registered Agent)

Tallahassee, FL 32301

6. 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: Maria Lorey
Signature of Registered Agent

asst. Sec.
maria Lorey

7. 1190 Interstate Parkway

(Principal office address)

Augusta, GA 30909

8. If limited partnership is a limited liability limited partnership, check box

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TALLAHASSEE, FLORIDA

9. P. O. Box 204227

(Mailing address)

Augusta, GA 30917

10. Name, principal office address, and mailing address of each general partner:

John W. Gibson

(Name)

1190 Interstate Parkway

(Street Address)

Augusta, GA 30909

P. O. Box 204227

(Mailing Address)

Augusta, GA 30917

James M. Hull

(Name)

1190 Interstate Parkway

(Street Address)

Augusta, GA 30909

P. O. Box 204227

(Mailing Address)

Augusta, GA 30917

(Name)

(Street Address)

(Mailing Address)

(Name)

(Street Address)

(Mailing Address)

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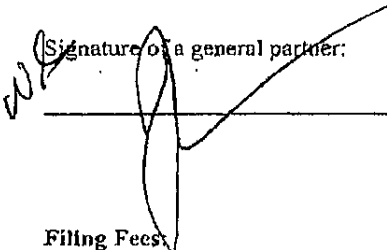
_____	_____
(Name)	(Street Address)
_____	_____
_____	(Mailing Address)
_____	_____
(Name)	(Street Address)
_____	_____
_____	(Mailing Address)
_____	_____

11. Effective date, if other than the date of filing: _____

(Effective date cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State.)

12. Attached is a certificate of existence duly authenticated, not more than 90 days prior to the delivery of this application to the Florida Department of State, by the Secretary of State or other official having custody of the entity's records in the jurisdiction under the law of which it is organized.

Signed this 3rd day of August, 20 09

(Signature of a general partner:


Filing Fees:	\$1,000.00 (\$965 Filing Fee and \$35 Registered Agent Fee)
Certified Copy (optional):	\$52.50
Certificate of Status (optional):	\$8.75

Control No. 09053918

STATE OF GEORGIA

Secretary of State

Corporations Division
315 West Tower
#2 Martin Luther King, Jr. Dr.
Atlanta, Georgia 30334-1530

09 AUG -5 AM
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CERTIFICATE OF EXISTENCE

I, Karen C Handel, Secretary of State and the Corporations Commissioner of the state of Georgia, hereby certify under the seal of my office that

GEMINI CONSTRUCTION, LLLP

Domestic Limited Partnership

was formed or was authorized to transact business on 07/30/2009 in Georgia. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.



WITNESS my hand and official seal of the City of Atlanta and the State of Georgia on 3rd day of August, 2009

Karen C Handel
Secretary of State

Certification Number: 4518323-1 Reference:
Verify this certificate online at <http://corp.sos.state.ga.us/corp/soskb/verify.asp>