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(Requestor's Name)				
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COVER LETTER

Division of Corp	porations	,	
SUBJECT:Nam	State Gunite e of Foreign Limited Partn	of Virginias ership or Limited Liability	L:P. Limited Partnership
partnership to transact but	certificate of status and fee siness in Florida. Indence concerning this mat		a foreign limited partnership or limited liability limited
	aci Kilen		
Ken	Contact Person Green & Co.	CRA'S	
	Firm/Company) 	
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<u>Colley</u>	VILL IX JO	<u> </u>	
(A)	y, State and Zip Code	A a a a	
_ TYTICI (N) KE		·com	
E-mail address: (to be u	sed for future annual report	t notification)	
For further information co	oncerning this matter, pleas	e call:	~
TYACI X	illen	at (817) 3	51-6688
Name of Contac	t Person		me Telephone Number
Enclosed is a check for th	e following amount:		
\$\$1,000.00 Filing Fees (\$965 Filing Fee and \$35 Registered Agent Fee)	□ \$1,008.75 Filing Fees and Certificate of Status	□ \$1,052.50 Filing Fees and Certified Copy	□\$1,061.25 Filing Fee, Certified Copy, and Certificate of Status
STREET ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Ci Tallahassee, FL 32301	rcle	MAILING ADDRESS: Registration Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314	

TO:

Registration Section



RECEIVED

13 MAR 13 AM 6: 43

SECRETARY OF STATE TALLAHASSEE, FLORIDA

February 18, 2013

TRACI KILLEN KEN GREEN & CO CPA'S 6508 COLLEYVILLE BLVD - STE 300 COLLEYVILLE, TX 76034

SUBJECT: TRI-STATE GUNITE OF VIRGINIA, LP

Ref. Number: W13000009818

We have received your document for TRI-STATE GUNITE OF VIRGINIA, LP and check(s) totaling \$175.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

There is a balance due of \$950.00. Refer to the attached fee schedule for a breakdown of the fees. Please return a copy of this letter to ensure your money is properly credited.

The form you submitted is for a GENERAL PARTNERSHIP, but your entity is a FOREIGN LIMITED PARTNERSHIP. Please complete and return the enclosed blank form(s).

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.

Tammy Hampton
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 613A00003928

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

(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. If name unavailable, name under which the limited partnership or limited liability limited partnership proposes to register to	transact
Acceptable Limited Liability Limited Partnership suffixes: Limited Liability Limited Partnership, L.L.L.P. or LLLP. If name unavailable, name under which the limited partnership or limited liability limited partnership proposes to register to	transact
	transact
business in Florida; must contain acceptable suffix.	
2. State or Country of Formation Date of Formation	<u> </u>
	VISIO
4. Federal Employer Identification Number: 20-8014019 5. Name of Registered Agent for Service of Process and Florida Street Address:	
1021 1001 110	o≺r
326 20th Ave	
Vero Beach, FL 32962	ATION
6. I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the prof all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation my position as registered agent.	
Signature of Registered Agent	
7. Principal Office: 8. Mailing Address:	
6508 Collevin HeBlud Ste 300 6508 Collevin HeBlud Ste 30	OC
Collevaile, TX 76034 Collevaile, TX 76034	
9. If limited partnership is a limited liability limited partnership, check box .	
10. Name, principal office address, and mailing address of each general partner:	
Name of General Partner: Chunte of Virginia Loame of General Partner:	
Street Address: 6508 Colleyville Blud Stellereet Address:	
colleville, TX 76034	
Mailing Address: 6508 Colley ville Bwd #30Mailing Address:	
Colleyville, IX 7603/	
Name of General Partner: Name of General Partner:	
Street Address: Street Address:	
Mailing Address: Mailing Address:	

Name of General		Name of General Partner:
Street Address:		Street Address:
Mailing Address:		Mailing Address:
2. Attached is a certi Florida Department of he law of which it is o	ficate of existence duly authenticated, not more State, by the Secretary of State or other offici	the this document is filed by the Florida Department of State.) The than 90 days prior to the delivery of this application to the final having custody of the entity's records in the jurisdiction under
	Signature of	a general partner

Page 2 of 2

\$52.50 \$8.75

\$1,000.00 (\$965 Filing Fce and \$35 Registered Agent Fec)

The individual signing this document affirm that the facts stated herein are true and the individual is aware that 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.

Filing Fees:

Certified Copy (optional):

Certificate of Status (optional):

SECRETARY OF STATE AS DIVISION OF CORPORATIONS
13 MAR 13 PM 2: 29

Commonwealth & Hirginia



State Corporation Commission

CERTIFICATE OF FACT

I Certify the Following from the Records of the Commission:

A certificate of limited partnership was filed with the Commission on behalf of Tri-State Gunite of Virginia, LP, a limited partnership formed under the laws of VIRGINIA, effective as of December 19, 2006.

As of the date below, articles of cancellation have not been filed in this office by Tri-State Gunite of Virginia, LP, a Virginia limited partnership.

Nothing more is hereby certified.



Signed and Sealed at Richmond on this Date: March 4, 2013

Joel H. Peck, Clerk of the Commission