

B16000000120

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

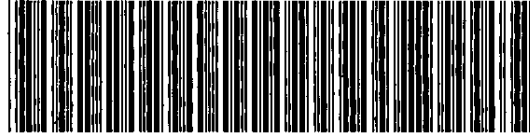
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Cert. W16-41137

Office Use Only



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06/03/16--01013--025 **1061.25

2016 JUN 13 P 5:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

S Warren

JUN 15 2016



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 6, 2016

JOHN CAMPBELL
777 BEAL PARKWAY
FORT WALTON BEACH, FL 32547

SUBJECT: ZT CONSTRUCTION, LP
Ref. Number: W16000041137

We have received your document for ZT CONSTRUCTION, LP and your check(s) totaling \$1061.25. However, the enclosed document has not been filed and is being returned for the following correction(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 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.

Stacey M Warren
Regulatory Specialist II

Letter Number: 816A00011903

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ZT Construction, LP

Name of Foreign Limited Partnership or Limited Liability Limited Partnership

The enclosed application, certificate of status and fees are submitted to register a foreign limited partnership or limited liability limited partnership to transact business in Florida.

Please return all correspondence concerning this matter to:

John Campbell

Contact Person

ZT Construction, LP

Firm/Company

777 Beal Parkway

Address

Fort Walton Beach, Florida 32547

City, State and Zip Code

jcampbell@zt-construction.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

John Campbell

at

713

245-6654

Name of Contact Person

Area Code and Daytime Telephone Number

Enclosed is a check for the 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 Circle
Tallahassee, FL 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

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

1. ZT Construction, LP

(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 business in Florida; must contain acceptable suffix.

2. Texas

State or Country of Formation

3. 8/27/2014

Date of Formation

4. Federal Employer Identification Number: 35-2515718

5. Name of Registered Agent for Service of Process and Florida Street Address:

John Campbell

777 Beal Parkway

Fort Walton Beach, FL 32547

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.



Signature of Registered Agent

7. Principal Office:

11233 Shadow Creek Pkwy ste 313

Pearland, TX 77584

8. Mailing Address:

11233 Shadow Creek Pkwy ste 313

Pearland, TX 77584

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: Taseer Badar

Street Address: 11233 Shadow Creek Pkwy ste 313

Pearland, TX 77584

Mailing Address: 11233 Shadow Creek Pkwy ste 313

Pearland, TX 77584

Name of General Partner: _____

Street Address: _____

Mailing Address: _____

Name of General Partner: Kraig Killough

Street Address: 11233 Shadow Creek Pkwy ste 313

Pearland, TX 77584

Mailing Address: 11233 Shadow Creek Pkwy ste 313

Pearland, TX 77584

Name of General Partner: _____

Street Address: _____

Mailing Address: _____

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Name of General Partner: _____ Name of General Partner: _____

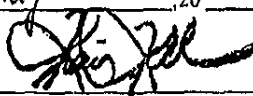
Street Address: _____ Street Address: _____

Mailing 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 05th day of May, 2016



Signature of a general partner

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

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 2016 MAY 13 P 5:39
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

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



Carlos H. Cascos
Secretary of State

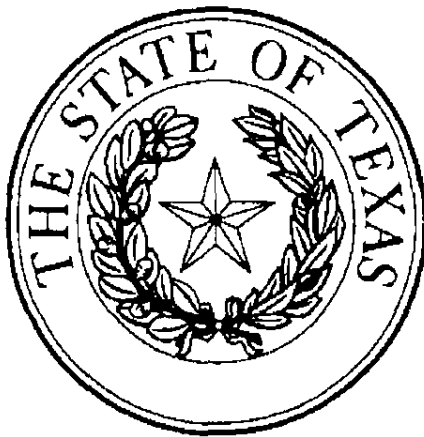
Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for ZT Construction, L.P. (file number 802053787), a Domestic Limited Partnership (LP), was filed in this office on August 27, 2014.

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 June 14, 2016.



A handwritten signature in black ink, appearing to read "Cascos", followed by a horizontal line.

Carlos H. Cascos
Secretary of State