## F05000001994

(Requestor's Name)
(Address)
<b>,</b>
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
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## TRANSMITTAL LETTER

PO: Registration Section Division of Corporations	
SUBJECT: RJC Contracting, Incor	
(Name of corp	poration - must include suffix)
Dear Sir or Madam:	
	on for Authorization to Transact Business in Florida," ed to register the above referenced foreign corporation to
Please return all correspondence concerning this	matter to the following:
Christopher J. Shields	, Esq.
(Na Pavese Law Firm	ame of Person)
1833 Hendry Street	rm/Company)
	(Address)
Fort Myers, FL 33901	
	(State and Zip code)
(0.03)	State and Esp voucy
For further information concerning this matter, pl	lease call:
Christopher J. Shields at (2) (Name of Person)	TAGO O
STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314
Enclosed is a check for the following amount:	
\$70.00 Filing Fee S78.75 Filing Fee & Certificate of Status	☐ \$78.75 Filing Fee & ☐ \$87.50 Filing Fee, Certified Copy

## APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

	orporation; must include "INCORPORATED orp," "Inc," "Co," or "Corp.")	o," "COMPANY," "CORPORA	iion,"	
(If name unavaila	ble in Florida, enter alternate corporate name	e adopted for the purpose of trans		
Tenness	see	20-2153730		
(State or country )	inder the law of which it is incorporated)	(FEI number, if	applicable)	
5		. Perpetual	Perpetual	
(Date of incorporation) (D		(Duration: Year corp. will cea	Ouration: Year corp. will cease to exist or "perpetual")	
	(Date first transacted business (SEE SECTIONS 607.1501 & 607.1	in Florida, if prior to registration) [502, F.S., to determine penalty li		
200 05471 -	•			
209 Chilho	wee School Road, Suite G. Sey Principal office ad			
		,		
	(Current mailing ad	dress)		
			<u> </u>	
	on of corporation authorized in home state or o	country to be carried out in state o	f Florida)	
(Purpose(s		•	f Florida)	
(Purpose(s)	of corporation authorized in home state or o	•	f Florida)	
(Purpose(s) Name and stree	of corporation authorized in home state or one taddress of Florida registered agent: (P.  Christopher J. Shields	•	f Florida)  7ALLAII	
(Purpose(s)  Name and stree  Name:	of corporation authorized in home state or one taddress of Florida registered agent: (P.  Christopher J. Shields  1833 Hendry Street	O. Box NOT acceptable)	05 MAR 28	
(Purpose(s)  Name and stree  Name:	of corporation authorized in home state or of taddress of Florida registered agent: (P.  Christopher J. Shields  1833 Hendry Street  Fort Myers	O. Box NOT acceptable)  , Florida 33901	OS MAR 28 SELVARIAGES TALLARIAGES	
(Purpose(s)  Name and stree  Name:	of corporation authorized in home state or one taddress of Florida registered agent: (P.  Christopher J. Shields  1833 Hendry Street	O. Box NOT acceptable)	OS MAR 28 SELVARIAGES TALLARIAGES	
(Purpose(s)  Name and stree  Name:  Office Address:	of corporation authorized in home state or of taddress of Florida registered agent: (P.  Christopher J. Shields  1833 Hendry Street  Fort Myers  (City)  cent's acceptance:	O. Box NOT acceptable) , Florida 33901  (Zip code)	OS MAR 28 AM II: 4 SELVINA SEL FLOR	
(Purpose(s) Name and stree Name: ffice Address:  Registered ag	christopher J. Shields  1833 Hendry Street  Fort Myers  (City)  cent's acceptance:  ed as registered agent and to accept serve	O. Box NOT acceptable) , Florida 33901 (Zip code)	TALLAILA FLOWER at the ated corporation at the	
(Purpose(s) Name and stree Name: ffice Address:  O. Registered againg been namesignated in this	conference:  address of Florida registered agent: (P.  Christopher J. Shields  1833 Hendry Street  Fort Myers  (City)  cent's acceptance:  address of Florida registered agent: (P.  Christopher J. Shields  (City)	O. Box NOT acceptable)  , Florida 33901 (Zip code)  vice of process for the above statement as registered agent and compared to the statement as a stat	ated corporation at the agree to act in this capa	
Name and stree  Name:  Office Address:  O. Registered aglaving been namesignated in this arther agree to contact the contact that the contact the contact that the contact that the contact the contact that the c	christopher J. Shields  1833 Hendry Street  Fort Myers  (City)  cent's acceptance:  ed as registered agent and to accept serve	O. Box NOT acceptable)  , Florida 33901 (Zip code)  vice of process for the above stement as registered agent and correlative to the proper and com	ated corporation at the agree to act in this capa	
(Purpose(s) . Name and stree Name: Office Address:  O. Registered aguaring been namesignated in this	conference of the composition authorized in home state or of the composition authorized agent. (P. Christopher J. Shields  1833 Hendry Street  Fort Myers  (City)  The composition authorized in home state or of the composition authorized agent and to accept serve application, I hereby accept the appoint to apply with the provisions of all statutes.	O. Box NOT acceptable)  , Florida 33901 (Zip code)  vice of process for the above stement as registered agent and correlative to the proper and com	ated corporation at the agree to act in this capa	
(Purpose(s) Purpose(s) Name and stree Name: Office Address:  O. Registered aguary aguing been namesignated in this arther agree to contact the street agree the street agree to contact the street agree the street agree the street agreet agreet the street agreet	conference of the composition authorized in home state or of the composition authorized agent. (P. Christopher J. Shields  1833 Hendry Street  Fort Myers  (City)  The composition authorized in home state or of the composition authorized agent and to accept serve application, I hereby accept the appoint to apply with the provisions of all statutes.	O. Box NOT acceptable)  , Florida 33901 (Zip code)  vice of process for the above stement as registered agent and correlative to the proper and com	ated corporation at the agree to act in this capa	

- 11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.
- 12. Names and business addresses of officers and/or directors:

A. DIRECT	ORS . '		
Chairman:	John Leonardi		<u>-</u>
Address:	1314 Jambalana Lane		
	Fort Myers, FL 33902		
Vice Chairman	n:		
Address:		<u> </u>	
			<u></u>
Director:			<del>-</del>
Address:			
Director:			
B. OFFICE	RS		
President:	John Leonardi	· · · · · · · · · · · · · · · · · · ·	
Address:	1314 Jambalana Lane		
	Fort Myers, FL 33902		
Vice Presiden	tt	<u> </u>	<del></del>
Address:			1
			···
Secretary:	Robert Morin		; s.
Address:	837 Mockingbird Road, Seymour, Tennessee 37865		ਦੇ ਸ਼
Treasurer:		1DA 9	
Address:			<del></del> - · ·
NOTE: If n	ecessary, you may attach an addendum to the application listing additional officer	s and/or directors.	
13	(Signature of Director or Officer listed in number 12 of the application)		
1.4			
14	John Leonard1  (Typed or printed name and capacity of person signing application)		

**Secretary of State Division of Business Services** 312 Eighth Avenue North 6th Floor, William R. Snodgrass Tower Nashville, Tennessee 37243

161 HIGHWAY 100 ÑÁSĦVILLE, TN 37221 ISSUANCE DATE: 03/18/2005 REQUEST NUMBER: 05077138 TELEPHONE CONTACT: (615) 741-6488

CHARTER/QUALIFICATION DATE: 12/29/2004 STATUS: ACTIVE CORPORATE EXPIRATION DATE: PERPETUAL CONTROL NUMBER: 0484060 JURISDICTION: TENNESSEE

REQUESTED BY: <u>8161 HIGHWAY 100</u> NASHVILLE, TN 37221

## CERTIFICATE OF EXISTENCE

I, RILEY C DARNELL, SECRETARY OF STATE OF THE STATE OF TENNESSEE DO HEREBY CERTIFY THAT "RJC CONTRACTING, INCORPORATED"

IS A CORPORATION DULY INCORPORATED UNDER THE LAW OF THIS STATE WITH DATE OF INCORPORATION AND DURATION AS GIVEN ABOVE; THAT ALL FEES, TAXES, AND PENALTIES OWED TO THIS STATE WHICH AFFECT THE EXISTENCE OF THE CORPORATION HAVE BEEN PAID; THAT ARTICLES OF DISSOLUTION HAVE NOT BEEN FILED; AND THAT ARTICLES OF TERMINATION OF CORPORATE EXISTENCE HAVE NOT BEEN FILED

FOR: REQUEST FOR CERTIFICATE

ON DATE: 03/18/05

RECEIVED:

FEES \$120.00

\$0.00

TOTAL PAYMENT RECEIVED:

\$120.00

RECEIPT NUMBER: 00003683016 ACCOUNT NUMBER: 00101230

161 HIGHWAY 100

NASHVILLE, TN 37221-0000

FROM:

RILEY C. DARNELL SECRETARY OF STATE