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(C	ity/State/Zip/Phone #)	•
PICK-UP	☐ WAIT	MAIL
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(B	susiness Entity Name)	
(D	ocument Number)	
Certified Copies	Certificates of	Status
Special Instructions to	Filing Officer:	
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CB 11-13-06 WOB-47051



October 26, 2006

JAMES MACHART 1049 BROWNS RD MIDDLEBURG, FL 32068

SUBJECT: MACHART CONCRETE, INC.

Ref. Number: W06000047051

We have received your document for MACHART CONCRETE, INC. and your check(s) totaling \$70.00. However, the document has not been filed and is being retained in this office for the following:

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) 245-6925.

Letter Number: 706A00063723

Cynthia Blalock Document Specialist

COVER LETTER

TO: New Filing Section Division of Corporations
SUBJECT: MACHART CONCRETE, INC.
(Name of corporation - must include suffix)
Dear Sir or Madam:
The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," and check are submitted to register the above referenced foreign corporation to transact business in Florida.
Please return all correspondence concerning this matter to the following: JAMES MACHART
(Name of Person)
MACHART CONCRETE, INC.
(Firm/Company)
1049 BROWNS ROAD
(Address) MIDDLEBURG, FL 32068
(City/State and Zip code)
For further information concerning this matter, please call:
JAMES MACHART at (904) 214-9851
(Name of Person) (Area Code & Daytime Telephone Number)
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 MAILING ADDRESS: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314
Enclosed is a check for the following amount:
\$70.00 Filing Fee \$\sum \text{\$570.00 Filing Fee} \text{\$\sum \$578.75 Filing Fee} \text{\$\sum \$578.75 Filing Fee} \text{\$\sum \$\sum \$278.75 Filing Fee} \$\sum \$\su

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.

(11 Hailie ullaval	lable in Florida, enter alternate corporate nam	e adopted for the purpose of transacting business in Florida
ILLINOIS		36-4277644
(State or country	under the law of which it is incorporated)	(FEI number, if applicable)
07-17-98		N/A
(Date	e of incorporation)	(Duration: Year corp. will cease to exist or "perpetual")
<u>N/A</u>		
		in Florida, if prior to registration) 1502, F.S., to determine penalty liability)
1049 BR	OWNS ROAD	2002, 2105, to determine pointry intomicy
	(Principal office ad	ldress)
MIDDLE	BURG, FL 32068	
	(Current mailing ad	ldress)
COMOD	-TE ! ABOD	
	ETE LABOR	
(Purpose(s) of corporation authorized in home state or	country to be carried out in state of Florida)
Name and stre	et address of Florida registered agent: (P.	O. Box NOT acceptable)
Name:	JAMES MACHART	<u></u>
ffice Address:	1049 BROWNS ROAD	
	MIDDLEBURG	, Florida 32068 (Zip code)
	(City)	(Zip code)

(Registered agent's signature)

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. DIRECTORS Chairman: NONE Vice Chairman: NONE Address: _____ Director: NONE Director: NONE **B. OFFICERS** President: JAMES MACHART Address: 1049 BROWNS AD ROAD MIDDLEBURG, FL 32068 Vice President: JAMES MACHART Address: 1049 BROWNS ROAD MIDDLEBURG, FL 32068 Secretary: JAMES MACHART Address: (SAME) Treasurer: JAMES MACHART Address: (SAME) NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. (Signature of Director or Officer listed in number 12 of the application) 14. JAMES MACHART (Typed or printed name and capacity of person signing application)



To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that

MACHART CONCRETE INC., A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON JULY 17, 1998, APPEARS TO HAVE COMPLIED WITH ALL THE PROVISIONS OF THE BUSINESS CORPORATION ACT OF THIS STATE RELATING TO THE PAYMENT OF FRANCHISE TAXES, AND AS OF THIS DATE, IS IN GOOD STANDING AS A DOMESTIC CORPORATION IN THE STATE OF ILLINOIS.



In Testimony Whereof, I hereto set my hand and cause to be affixed the Great Seal of the State of Illinois, this 1ST day of NOVEMBER A.D. 2006.

Desse White