# F10000004851

·
MAIL
····
atus

Office Use Only



800186851748

10/22/10--01019--009 \*\*87.50

10 NOV -2 AM 11:58

WI-50117

### COVER LETTER

TO: New Filing Section Division of Corporations	
<b>SUBJECT:</b> Regional Construction S	ervices, Inc
Name of corporati	on - must include suffix
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation for "Certificate of Existence," or "Certificate of Good Stabove referenced foreign corporation to transact businesses."	anding" and check are submitted to register the
Please return all correspondence concerning this mat	ter to the following:
Mathew Judson	
Name (	of Person
Regional Construction Services, I	nc.
Firm/C	ompany
200 Southbridge Street	
Ad	dress .
Mooresville, IN 46158	
City/State	and Zip code
mary@reconserv.com	
E-mail address: (to be use	d for future annual report notification)
For further information concerning this matter, please	e call:
Mary Judson at ( 317	<sub>)</sub> 831-3122
	a 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 \$Certificate of Status	\$78.75 Filing Fee & Sertified Copy \$87.50 Filing Fee, Certificate of Status & Certified Copy



#### FLORIDA DEPARTMENT OF STATE Division of Corporations

SECRETARY OF STATE TALLAHASSEE, FLORIDA

October 25, 2010

MATTHEW JUDSON 200 SOUTHBRIDGE ST MOORESVILLE, IN 46158

SUBJECT: REGIONAL CONSTRUCTION SERVICES, INC.

Ref. Number: W10000050117

We have received your document for REGIONAL CONSTRUCTION SERVICES, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of your corporation is not available in Florida. An out-of-state corporation whose name is not available must adopt an alternate corporate name for use in Florida. The alternate corporate name must contain "Incorporated," "Company, "Corporation," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp." Please enter the alternate corporate name in the space provided in number one of the application.

Simply adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please note that the alternate name is also unavailable for use in Florida. The name designated in your document is the same as, or it is not destinquishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revolked entity provides the Department of State with a notorized affidavit stating that they have no intention of reinstating therefore, releasing the name for use to the new entity.

If you have any further questions concerning your document, please call (850) 245-6901.

Pamela Smith
Regulatory Specialist II
New Filing Section

Letter Number: 310A00025166

Division of Comparations DO DOV 6997 Tallahagas Florida 9991

## 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.

(Enter name of co	struction Services, Inc. prporation; must include "INCORPORATED," prp," "Inc," "Co," or "Corp.")	"COMPANY," "CORPORATION,"	ı	
	Construction	Services, Inc.		
(If name unavaila	ble in Florida, enter alternate corporate name a	adopted for the purpose of transacting business in Florida)		
2. Indiana	3.	04-3665217 (FEI number, if applicable)	-	
(State or country	under the law of which it is incorporated)	(FEI number, if applicable)		
4. 4-29-2002		perpetual		
(Date	of incorporation)	(Duration: Year corp. will cease to exist or "perpetual")		
6. N/A			-	
	(Date first transacted business in (SEE SECTIONS 607.1501 & 607.15	Florida, if prior to registration) 02, F.S., to determine penalty liability)		
7, 200 Southb	ridge Street, Mooresville, IN 4	6158	_	
	(Principal office addr	ress)		
PO Box 36	8, Mooresville, IN 46158		_	<b>:</b> :5
	(Current mailing addr	ress)	≓	<u>≥</u>
8. General Co			0 NOV -2	SIGNE
(Purpose(s	) of corporation authorized in home state or co	untry to be carried out in state of Florida)	2	
9. Name and stree	t address of Florida registered agent: (P.O	Box NOT acceptable)		
Name:	CT Corporation System		出二:58	F ST
Office Address:	1200 South Pine Island Road		58	ATE (TIO)
	Plantation	, Florida 33324(Zip code)		<sup>7</sup> A
	(City)	(Zip code)		
Having been nam designated in this further agree to co	application, I hereby accept the appointm	ce of process for the above stated corporation at the panent as registered agent and agree to act in this capa elative to the proper and complete performance of maniferial sition as registered agent.	city.	1
	James M. Halpin Assistant Secretary			
_	(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:		
Address:	errestetsendte Albe - 1	de deter deser
Vice Chairman:	······································	<del></del>
Address:	<b></b>	
Director:		
Address:		
Director;	10 X	SECR
Address:	)V -2	ETARY
B. OFFICERS	A =	<u>ျားမှာ</u> (Japana)
President: Mathew M Judson	<u>:</u>	ATE TALE
Address: 1323 West Antioch Lane		*
Mooresville, IN 46158		- <del></del>
Vice President:		
Address:		<del></del>
Secretary:		<del></del>
Address:		
Treasurer:		
Address:		
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.		
Signature of Director or Officer  The officer of director signing this document (and who is listed in number 12 above) affirms that the facts stated have true and that he or she is aware that false information submitted in a document to the Department of State constituted degree felony as provided for in s.817.155, F.S.	erein titute:	
14. Mathew M Judson, President		<u>.                                    </u>
(Typed or printed name and capacity of person signing application)		

## STATE OF INDIANA OFFICE OF THE SECRETARY OF STATE CERTIFICATE OF EXISTENCE

To Whom These Presents Come, Greetings:

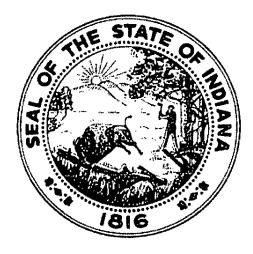
I, TODD ROKITA, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana, the custodian of the corporate records, and proper official to execute this certificate.

I further certify that records of this office disclose that

#### REGIONAL CONSTRUCTION SERVICES, INC.

duly filed the requisite documents to commence business activities under the laws of State of Indiana on April 29, 2002, and was in existence or authorized to transact business in the State of Indiana on September 14, 2010.

I further certify this For-Profit Domestic Corporation has filed its most recent report required by Indiana law with the Secretary of State, or is not yet required to file such report, and that no notice of withdrawal, dissolution or expiration has been filed or taken place.



In Witness Whereof, I have hereunto set my hand and affixed the seal of the State of Indiana, at the city of Indianapolis, this Fourteenth Day of September, 2010.

TODD ROKITA, Secretary of State

2002051400118 / 2010091428393