F11000003020

(Req	uestor's Name)				
(Address)					
(Address)					
(City)	/State/Zip/Phone	e #)			
PICK-UP	☐ WAIT	MAIL			
(Busi	iness Entity Nan	ne)			
(Document Number)					
Certified Copies	Certificates	of Status			
Special Instructions to Filing Officer:					

Office Use Only



300210222123

SECRETARY OF STATE OF



COVER LETTER

TO: New Filing Section Division of Corporations UNITED COASTAL AGGREGATE HAULERS, 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," or "Certificate of Good Standing" 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: Lynn Rose, Paralegal Name of Person Phelps Dunbar, LLP Firm/Company 365 Canal Street, Suite 2000 Address New Orleans, LA 70130 City/State and Zip code Keith Hinson [khinson@slbig.com] E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Lynn Rose at (504) 566-1311 ext. 1434

Area Code & Daytime Telephone Number Name of Person STREET/COURIER ADDRESS: **MAILING ADDRESS:** New Filing Section New Filing Section Division of Corporations Division of Corporations Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, FL 32314 Tallahassee, FL 32301 Enclosed is a check for the following amount: \$78.75 Filing Fee & \$87.50 Filing Fee, ¬\$70.00 Filing Fee **٦\$78.75** Filing Fee & Certificate of Status Certified Copy Certificate of Status &

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.

	OASTAL AGGREGATE HAULE corporation; must include "INCORPORAT				
"Inc.," "Co.," "C	forp," "Inc," "Co," or "Corp.")	LD,	COMPANY, CORD ORATION,		·
					
(If name unavail	able in Florida, enter alternate corporate na		adopted for the purpose of transacting busi	ness in Florida)	
2. LOUISIAN		_ 3.	45-2205591		
(State or country	under the law of which it is incorporated)		(FEI number, if applicable)	
_{4.} <u>May 10, 2</u>		5.	_perpetual		
(Date	of incorporation)		(Duration: Year corp. will cease to exist	or "perpetual")	
6. <u>August 1,</u>					
			n Florida, if prior to registration) 602, F.S., to determine penalty liability)		
₇ 2540 Sev	ern Avenue, Suite 100,	M	etairie. LA 70002		
	(Principal office				
2540 Sev	vern Avenue, Suite 10	0,	Metairie, LA 70002		
	(Current mailing	add	ress)		
o sales & services of cor	nmercial liability insurance on a group basis for and provid	ding a	ny related goods & services to truckers or other haulers of	aggregate materials	
*' 	s) of corporation authorized in home state of				
9. Name and stree	et address of Florida registered agent: ((P.C	. Box NOT acceptable)	11 JI SECT TALL	77
Name:	Capitol Corporate Service	s,	nc.	JUL 25 PH 2 20 ECRETARY OF STATE LLAHASSEE FLORID	1) 70 70 70
Office Address:	155 Office Plaza Drive, S	uite	<u>e A</u>	S PI	
	Tallahassee		, Florida <u>32301</u> (Zip code)	FL S	
	(City)	-	(Zip code)	ORNIAT	•
10. Registered as	gent's acceptance:			De C	
		ervi	ce of process for the above stated corpo	oration at the plac	c e

designated in this application, 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.

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: Keith Hinson Address: 2540 Severn Avenue, Suite 100, Metairie, LA 70002 Vice Chairman: Darren Marsh Address: 5900 Hiatus Road, Tamarac, FL 33321 Director: Zachary Keyes Address: 5900 Hiatus Road, Tamarac, FL 33321 Director: Trevor Keyes Address: 5900 Hiatus Road, Tamarac, FL 33321 B. OFFICERS President: Keith Hinson Address: 2540 Severn Avenue, Suite 100, Metairie, LA 70002 Vice President: Darren Marsh Address: 5900 Hiatus Road, Tamarac, FL 33321 Secretary: Zachary Keyes Address: 5900 Hiatus Road, Tamarac, FL 33321 Treasurer: Keith Hinson Address: 2540 Severn Avenue, Suite 100, Metairie, LA 70002

" Utar in

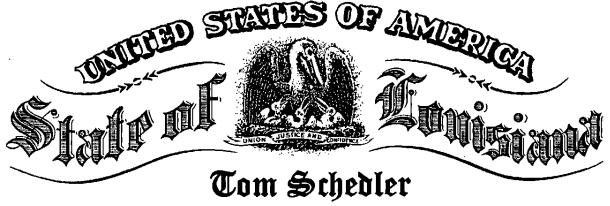
Signature of Director or Officer

The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she 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.

atadhan addendum to the application listing additional officers and/or directors.

14. Keith Hinson, President and Chief Executive Officer

NOTE: If necessary



SECRETARY OF STATE

As Secretary of State, of the State of Louisiana, I do hereby Certify that

the Articles of Incorporation of

UNITED COASTAL AGGREGATE HAULERS, INC.

Domiciled at METAIRIE, LOUISIANA,

Were filed in this Office and a Certificate of Incorporation was issued on May 10, 2011,

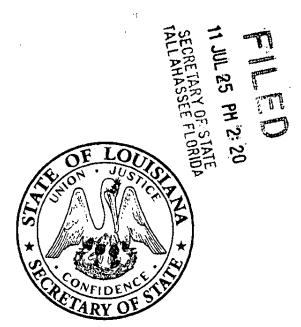
I further certify that no Certificate of Dissolution has been issued.

In testimony whereof, I have hereunto set my hand and caused the Seal of my Office to be affixed at the City of Baton Rouge on,

July 20, 2011

Secretary of State

Web 40507806D



Certificate ID: 10185204#XMJ62

To validate this certificate, visit the following web site, go to Commercial Division, Certificate Validation, then follow the instructions displayed. www.sos.louisiana.gov