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Florida Department of State
Division of Corporations
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RE-SUBMIT

To: Division of Corporations
Fax Number : (850) 617-6383

From: Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850) 205-8842
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****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**FOREIGN PROFIT/NONPROFIT CORPORATION
CHAPMAN CONSTRUCTION MANAGEMENT CO. INC.**

Certificate of Status	0
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Page Count	04
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8/4/2015 12:46:42 PM From: To: 8506176383 (2/5)



July 30, 2015

FLORIDA DEPARTMENT OF STATE
Division of Corporations

CT

SUBJECT: CHAPMAN CONSTRUCTION MANAGEMENT CO, INC.
REF: W15000051520

RE-SUBMIT

Please retain original filing
date of submission 7/29

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

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.

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.

Neysa Culligan
Regulatory Specialist II

FAX Aud. #: H15000183571
Letter Number: 315A00015977

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

P.O BOX 6327 - Tallahassee, Florida 32314

**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.

Chapman Construction Management Co., Inc.

I.

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

WG Chapman GP, Inc.

(If name unavailable in Florida, enter Alternate corporate name adopted for the purpose of transacting business in Florida)
Times 75-2874-802

2.

(State or country under the law of which it is incorporated)
April 18, 2000

3.

(FBI number, if applicable)

4.

(Date of incorporation)

5.

(Date of duration, if other than perpetual)

6.

(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

10011 W. University Drive, McKinney, TX 75070

3.

(Principal office address)

(Current mailing address, if different)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

National Registered Agents, Inc.

Name: _____

1200 South Pine Island Road

Office Address:

Plantation

33324

(City)

Florida

(Zip code)

9. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept this 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.

Michael Donovan, Asst. Secretary
(Registered agent's signature)

(Registered agent's signature)

10. 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.

11. Names and business addresses of officers and/or directors:

A. DIRECTORS

Johany M. Priest

Chairman: _____

Principal Office Address _____

Address: _____

Vice Chairman: _____

Address: _____

Michael Fournier

Director: _____

4400 Post Oak Pkwy, STE 1000

Address: _____

Houston, TX 77027

Leland S. Tedder

Director: _____

Principal Office Address _____

Address: _____

B. OFFICERS

Leland S. Tedder

President: _____

Principal Office Address _____

Address: _____

Malcolm H. Niven

Vice President: _____

Principal Office Address _____

Address: _____

Lori Pinder

Secretary: _____

4400 Post Oak Pkwy, STE 1000, Houston, TX 77027

Address: _____

Richard W. Russell

Treasurer: _____

4400 Post Oak Pkwy, STE 1000, Houston, TX 77027

Address: _____

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

12. _____

Signature of Director or Officer

The officer or director signing this document (and who is listed in number 11 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.

Lori Pinder

13. _____

(Typed or printed name and capacity of person signing application)

2015 JUL 29 AM 8:43

FILED

13

11

11

11

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, Articles Of Incorporation for CHAPMAN CONSTRUCTION MANAGEMENT CO., INC. (file number 157956300), a Domestic For-Profit Corporation, was filed in this office on April 18, 2000.

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 July 28, 2015.



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

Carlos H. Cascos
Secretary of State