

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H16000082066 3)))



H160000820683ABC\$

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Pax Number : (850) 617-6383

From:

Account Name : LICENSES ETC INC

Account Number : 120070000159

Phone

: (239)777-1028

Fax Number

: (877) 275-3593

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. \*\*

ETC@LICENSESETC.COM Email Address:

### FOREIGN PROFIT/NONPROFIT CORPORATION

### J. Brennon Construction, Inc.

Certificate of Starus	1
Certified Copy	1
Page Count	06
Estimated Charge	\$87.50

NPROADOR THE THE

···

(((H160000820663)))

### **COVER LETTER**

SUBJECT: J. Brennon Construction, 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:  Lisa Adams  Name of Person  Licenses, Etc.  Firm/Company  886 110th Ave. N., Suite #6  Address  Naples, FL 34108  City/State and Zip code  etc@licensesetc.com  E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:  Lisa Adams  Name of Person  Area Code  Duytine Telaphone Number  MALLING ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301  Enclosed is a check for the following amount:  S78.75 Filing Fee & Certified Copy  Certificate of Status Certified Copy  Certificate of Status Certified Copy	TO: Registration Division of C				•	
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:  Lisa Adams  Name of Person  Licenses, Etc.  Firm/Company  886 110th Ave. N., Suite #6  Address  Naples, FL 34108  City/State and Zip code  etc@licensesetc.com  E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:  Lisa Adams  at (239), 777-8321  Name of Person  Area Code  Duytime Telephone Number  STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301  Enclosed is a check for the following amount:  S78.75 Filing Fee & Certificate of Status	SUBJECT: J.	Brennon Cons	truction	, Inc.		
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:  Lisa Adams  Name of Person  Licenses, Etc.  Firm/Company  886 110th Ave. N., Suite #6  Address  Naples, FL 34108  City/State and Zip code  etc@licensesetc.com  E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:  Lisa Adams  or (239), 777-8321  Name of Person  Area Code  STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 266) Executive Center Circle Tallahassee, FL 32301  Enclosed is a check for the following amount:  S78.75 Filing Fee & S78.75 Filing Fee & Certificate of Status  Certificate of Status  Certified Copy  Certificate of Status					include suffix	····
"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:  Lisa Adams  Name of Person  Licenses, Etc.  Firm/Company  886 110th Ave. N., Suite #6  Address  Naples, FL 34108  City/State and Zip code  etc@licensesetc.com  E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:  Lisa Adams  at (239) 777-8321  Name of Person  Area Code  Daytime Telephone Number  STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 266] Executive Center Circle Tallahassee, FL 32301  Enclosed is a check for the following amount:  \$ 570.00 Filing Fee	Dear Sir or Madam:					
Name of Person  Licenses, Etc.  Firm/Company  886 110th Ave. N., Suite #6  Address  Naples, FL 34108  City/State and Zip code  etc@licensesetc.com  E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:  Lisa Adams  Name of Person  at (239 , 777-8321  Name of Person  Area Code  Daytime Telephone Number  STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301  Enclosed is a check for the following amount:  \$70.00 Filing Fee  \$78.75 Filing Fee & Certificate of Status  Certificate of Status  Certificate of Status  Certificate of Status	"Certificate of Existe	nce," or "Certificate	of Good Sta	nding"	and check are subt	t Business in Florida," nitted to register the
Name of Person  Licenses, Etc.  Firm/Company  886 110th Ave. N., Suite #6  Address  Naples, FL 34108  City/State and Zip code  etc@licensesetc.com  E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:  Lisa Adams  Name of Person  Area Code  STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building Clifton Bu	Please return all corr	espondence concerni	ng this matte	er to the	following:	
Firm/Company  886 110th Ave. N., Suite #6  Address  Naples, FL 34108  City/State and Zip code  etc@licensesetc.com  E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:  Lisa Adams  at ( 239 ) 777-8321  Name of Person  Area Code  STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tollahassee, FL 32301  Enclosed is a check for the following amount:  S70.00 Filing Fee	Lisa Adams					
Firm/Company  886 110th Ave. N., Suite #6  Address  Naples, FL 34108  City/State and Zip code  etc@licensesetc.com  E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:  Lisa Adams  Name of Person  Area Code  STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301  Enclosed is a check for the following amount:  S70.00 Filing Fee  S78.75 Filing Fee & S87.50 Filing Fee, Certificate of Status  Certificate of Status  Certificate of Status			Name of	Person		**************************************
Address  Naples, FL 34108  City/State and Zip code  etc@licensesetc.com  E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:  Lisa Adams  To at a code  STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301  Enclosed is a check for the following amount:  S70.00 Filing Fee  S78.75 Filing Fee & Certificate of Status  Certificate of Status  City/State and Zip code  Address  ATT-8321  Daytime Telephone Number  MAILING ADDRESS: Registration Section Division of Corporations Clifton Building P.O. Box 6327 Tallahassee, FL 32314  Enclosed is a check for the following amount:  Certificate of Status  Certificate Of Status	Licenses, Etc.					
Naples, FL 34108  City/State and Zip code  etc@licensesetc.com  E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:  Lisa Adams  Name of Person  STREET/COURIER ADDRESS:  Registration Section  Division of Corporations  Clifton Building  2661 Executive Center Circle  Tallahassee, FL 32301  Enclosed is a check for the following amount:  S70.00 Filing Fee  S70.00 Filing Fee  Certificate of Status  Certificate Of Status  City/State and Zip code  Address  AMILING ADDRESS:  Registration Section  Division of Corporations  Division of Corporations  P.O. Box 6327  Tallahassee, FL 32314  S87.50 Filing Fee,  Certificate of Status  Certificate Of Status			Firm/Cor	npany	······································	
Naples, FL 34108  City/State and Zip code  etc@licensesetc.com  E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:  Lisa Adams  Name of Person  STREET/COURIER ADDRESS:  Registration Section  Division of Corporations  Clifton Building  2661 Executive Center Circle  Tallahassee, FL 32301  Enclosed is a check for the following amount:  S70.00 Filing Fee  S70.00 Filing Fee  Certificate of Status  Certificate Of Status  City/State and Zip code  Address  AMILING ADDRESS:  Registration Section  Division of Corporations  Division of Corporations  P.O. Box 6327  Tallahassee, FL 32314  S87.50 Filing Fee,  Certificate of Status  Certificate Of Status	886 110th Av	e. N., Suite #6	;			
City/State and Zip code  etc@licensesetc.com  E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:  Lisa Adams  Int (				ress	······································	
E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:  Lisa Adams  Name of Person  Area Code  STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building Clifton Building Clofol Executive Center Circle Tallahassee, FL 32301  Enclosed is a check for the following amount:  S70.00 Fifing Fee  S78.75 Filing Fee & Certified Copy Certificate of Status  Certificate of Status  Certificate of Status	Naples, FL 34	108				
E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:  Lisa Adams    at ( 239 ) 777-8321     Name of Person   Area Code   Daytime Telephone Number    STREET/COURIER ADDRESS:   MAJLING ADDRESS:   Registration Section   Registration Section   Division of Corporations   Division of Corporations   Clifton Building   P.O. Box 6327     2661 Executive Center Circle   Tallahassee, FL 32301    Enclosed is a check for the following amount:  S70.00 Filing Fee   S78.75 Filing Fee & Certificate of Status   Certificate Of Status			City/State a	and Zip	code	ده می در در در در داده میشود. و داده و بیشتر همیشود میشود به این میشود به در و در د در در د
Lisa Adams   nt ( 239 ) 777-8321     Name of Person   Area Code   Duytime Telephone Number	etc@licenses	etc.com				
Lisa Adams  Name of Person  Area Code  Duytime Telephone Number  STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301  Enclosed is a check for the following amount:  S78.75 Filing Fee & Certificate of Status  Certificate of Status  Certificate Of Status		E-mail address	(to be used	for futt	re annual report ne	otification)
Name of Person  Area Code  Duytime Telephone Number  STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301  Enclosed is a check for the following amount:  \$70.00 Filing Fee  \$78.75 Filing Fee & \$78.75 Filing Fee, Certificate of Status  Certificate of Status	For further information	on concerning this m	atter, please	call:		
Name of Person  Area Code  Daytime Telephone Number  STREET/COURIER ADDRESS:  Registration Section  Division of Corporations  Clifton Building  2661 Executive Center Circle  Tallahassee, FL 32301  Enclosed is a check for the following amount:  \$\text{S70.00 Filing Fee} \text{ \$\text{S78.75 Filing Fee} & \$\text{ \$\text{S78.75 Filing Fee} & \$\text{ \$\text{Certificate of Status} & \$\text{Certified Copy} & \$\text{Certificate of Status} \text{ \$\text{Certificate of Status}  \$\text{Certi	Lisa Adams		ar ( 239	,	777-8321	
Registration Section Division of Corporations Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, FL 32301  Enclosed is a check for the following amount:  S70.00 Filing Fee Certificate of Status  Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314  Tallahassee, FL 32314  S78.75 Filing Fee & S87.50 Filing Fee, Certificate of Status	Name of Per			le	Daytime Teleph	one Number
☐ \$70.00 Filing Fee ☐ \$78.75 Filing Fee & ☐ \$78.75 Filing Fee & ☐ \$78.75 Filing Fee, Certificate of Status	Registration : Division of C Clifton Build 2661 Executi	Section Corporations ing ve Center Circle	S:		Registration Se Division of Cor P.O. Box 6327	ction porations
Certificate of Status Certified Copy Certificate of Status	Enclosed is a check fi	or the following amo	unt:			
	□ \$70.00 Fifing Fee					Certificate of Status &

(((H16000082066 3)))

(((H16000082066 3)))

### 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.

* **** **** *** ** **** **** ****	n Construction, Inc.		
(Enter name of co	orporation; must include "INCORPORATED, orp," "Inc," "Co," or "Corp.")	" "COMPANY," "CORPORATIO	N,"
(If name mavaila	ble in Florida, enter alternate corporate name	adopted for the purpose of transaction	ng business in Florida)
<u>Georgia</u>	3.	56-2574419	
(State or country	under the law of which it is incorporated)	(FEI number, if ap	plicable)
04/17/20	<b>06</b> 5.	Perpetual	
(Date	of incorporation)	(Date of duration, if other	than perpenual)
s			
	(Date first transacted business i (SEE SECTIONS 607.1501 & 607.1	n Florida, if prior to registration) 502, F.S., to determine penalty liabil	ity)
. 2121 New	/ Market Parkway, Suite #1:	18, Rocky Face, GA 307	740
		oal office address)	
2121 Nev	v Market Parkway, Suite #1	18. Rocky Face, GA 30	740
		ng address, if different)	دستاندانات و به به به ۱۹۸۸ کام میپیدی در این این این به ۱۹۸۸ کام به ۱۹۸۸ کام به ۱۹۸۸ کام به ۱۹۸۸ کام به ۱۹۸۸ ک
3. Name and street	<u>address</u> of Florida registered agent: (P.	O. Box <u>NOT</u> acceptable)	<b>X</b> 60
Name:	Timothy Evans, Sr.		7. 6 A
Office Address:	23808 SW 30th Ave.		THE PARTY.
	Newberry	Florida 32618	TT3 -<
	(City)	. Florida 32618 (Zip code)	
. Registered age	****		97 9 0
	nt's acceptance; ed as registered agent and to accept serv	ice of process for the above state	ed corporation at the place
lesignuted in this i jurther agree to co	application, I hereby accept the appoint onply with the provisions of all statutes of miliar with and accept the obligations of	nent as registered agent and agr relative to the proper and compl	ree to act in this capacity. etc performance of my
	<u>syn</u>	- GM	
	(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 Sceretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

 $(((H16000082066\ 3)))$ 

11. Nam	es and business addresses of officers and/or directors:			
A. DIRI	ECTORS			
Chairman				
-				
Vice Chai	rman:			
_				
Director:				
Director:				
		~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~		
			<u>ज</u> ि	5 (
B. OFFI	CERS	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	<del>ک</del> ے ۱	D ( custimeter constitues
President:	Brennon E. Smith, Sr.	7(500 		: - 111
Address:	149 Weatherby Drive		=======================================	7
	Rocky Face, GA 30740	윤지	<u></u>	مرور المراجعة المرجعة
Vice Presi	dent:	Ď		
Scoretary:				
Address:		<del></del>	<del></del> _	
Treasurer:				
Address:				
	If necessary, you may attach an addendum to the application listing additional office	ers and/or dire	ctors.	
12	Signature of Director or Officer			
The offici are true a	Signature of Director or Officer er or director signing this document (and who is listed in number 11 above) affirms not that he or she is aware that false information submitted in a document to the Deggree felony as provided for in s.817.155, F.S.			
	Brennon E. Smith, Sr., President			
	(Typed or printed name and capacity of person signing application)			

(((H16000082066 3)))

Control Number: 0629576

# STATE OF GEORGIA

# **Secretary of State**

Corporations Division 313 West Tower 2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530

#### CERTIFICATE OF EXISTENCE

I, Brian P. Kemp, the Sccretary of State of the State of Georgia, do hereby certify under the seal of my office that

### J. BRENNON CONSTRUCTION, INC

#### a Domestic Profit Corporation

was formed in the jurisdiction stated below or was authorized to transact business in Georgia on the below date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

Docket Number
Date Inc/Anth/Filed
Jurisdiction
Print Date
Form Number

: 13100637 : 04/17/2006 : Georgia : 04/01/2016 : 211



B: P. Kemp Secretary of State