

From: Bill Moore
6/8/2016

Fax: (813) 932-5244

To: +1 (850) 617-6383 Page 5 of 5 06/08/2016 3:10 PM

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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((H16000140410 3)))



H160001404103ABCR

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To:

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

From:

Account Name : CONTRACTORS REPORTING SERVICES, INC.
Account Number : I20050000099
Phone : (813)932-5244
Fax Number : (813)932-3782

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

Email Address: bill@activatemylicense.com

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TALLAHASSEE, FLORIDA

**FOREIGN PROFIT/NONPROFIT CORPORATION
CONTRACTING SOLUTIONS, LLC**

Certificate of Status	1
Certified Copy	1
Page Count	05
Estimated Charge	\$87.50

JUN 09 2016

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Corporate Filing Menu

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COVER LETTER

(((H16000140410 3)))

TO: **Registration Section**
Division of Corporations

SUBJECT: CONTRACTING SOLUTIONS, LLC

Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

BILL MOORE

Name of Person

CONTRACTORS REPORTING SERVICE INC

Firm/Company

13795 N NEBRASKA AVE

Address

TAMPA, FL 33613

City/State and Zip Code

BILL@ACTIVATEMYLICENSE.COM

E-mail address: (to be used for future annual report notification)

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SECRETARY OF FLORIDA
TALLAHASSEE, FL
16 JUN - 8 AM 10: 58

For further information concerning this matter, please call:

BILL MOORE

813

445-7135

Name of Contact Person

at (Area Code)

Daytime Telephone Number

MAILING ADDRESS:

Division of Corporations
Registration Section
P.O. Box 6327
Tallahassee, FL 32314

STREET ADDRESS:

Division of Corporations
Registration Section
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Enclosed is a check for the following amount:

☐ \$125.00 Filing Fee

☐ \$130.00 Filing Fee &
Certificate of Status

☐ \$155.00 Filing Fee &
Certified Copy

☒ \$160.00 Filing Fee, Certificate
of Status & Certified Copy

(((H16000140410 3)))

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

(((H16000140410.3)))

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. CONTRACTING SOLUTIONS, LLC

(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

CONTRACTING SOLUTIONS OF SOUTH FLORIDA, LLC

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C.," or "LLC.")

2. TN

3. 27-5085960

(Jurisdiction under the law of which foreign limited liability company is organized)

(FEF number, if applicable)

4.

(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 3845 WATMAN AVE

MEMPHIS, TN 38118

(Street Address of Principal Office)

6. 3845 WATMAN AVE

MEMPHIS, TN 38118

(Mailing Address)

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

Name:

LAWRENCE MIGLIARA

Office Address:

4936 W SAN RAFAEL ST

TAMPA

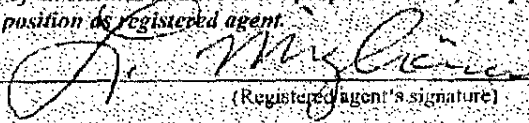
(City)

Florida 33629

(Zip code)

Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place 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.



(Registered agent's signature)

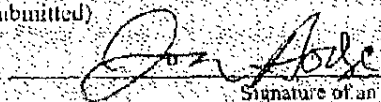
8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

JON HODGE-MGR

3845 WATMAN AVE

MEMPHIS, TN 38118

9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)



Signature of an authorized person

This document is executed in accordance with section 605.0203 (1)(b), Florida Statutes. I am aware that any 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.

JON HODGE

Typed or printed name of signer

(((H16000140410.3)))

16 JUN -8 AM 10:58



STATE OF TENNESSEE
Tre Hargett, Secretary of State
Division of Business Services
William R. Snodgrass Tower
312 Rosa L. Parks AVE, 6th FL
Nashville, TN 37243-1102

JON HODGE
JON HODGE
3845 WATMAN AVE
MEMPHIS, TN 38118

May 27, 2016

Request Type: Certificate of Existence/Authorization
Request #: 0203894

Issuance Date: 05/27/2016
Copies Requested: 1

Document Receipt

Receipt #: 002718674

Filing Fee: \$20.00

Payment-Credit Card - State Payment Center - CC #: 3674498014

Regarding: Contracting Solutions LLC
Filing Type: Limited Liability Company - Domestic
Formation/Qualification Date: 02/23/2011
Status: Active
Duration Term: Perpetual
Business County: SHELBY COUNTY

Control #: 651787
Date Formed: 02/23/2011
Formation Locale: TENNESSEE
Inactive Date:

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STATE
SECRETARY OF
TALADIA
16 JUN -8
AM 10:58

CERTIFICATE OF EXISTENCE

I, Tre Hargett, Secretary of State of the State of Tennessee, do hereby certify that effective as of the issuance date noted above

Contracting Solutions LLC

- * is a Limited Liability Company duly formed under the law of this State with a date of incorporation and duration as given above;
- * has paid all fees, taxes and penalties owed to this State (as reflected in the records of the Secretary of State and the Department of Revenue) which affect the existence/authorization of the business;
- * has filed the most recent annual report required with this office;
- * has appointed a registered agent and registered office in this State;
- * has not filed Articles of Dissolution or Articles of Termination. A decree of judicial dissolution has not been filed.


Tre Hargett
Secretary of State

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