F16000002945

(Re	equestor's Name)		
(Ad	ldress)		
(Ad	ldress)		
(Cit	ty/State/Zip/Phone	e #)	
PICK-UP	☐ WAIT	MAIL	
(Bu	isiness Entity Nar	me)	
(Document Number)			
Certified Copies	_ Certificates	s of Status	
Special Instructions to	Filing Officer:		
1			





600283793646

600283793646 04/04/16--01038--001 ***87.50



April 8, 2016

MICHAEL NYSTROM

10816 WASHAM POTTS RD.

CORNELIUS, NC 28031

SUBJECT: NYSTROM CONSTRUCTION, INC.

Ref. Number: W16000026271

We have received your document for NYSTROM CONSTRUCTION, 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 registered agent designated must be an active Florida entity Nor a foreign entity authorized to transact business in Florida.

Please correct the document.

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.

Dionne M Scott

Regulatory Specialist II Letter Number: 516A00007246

www.sunbiz.org

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

. **16** JUN 29 PH I2: 16

FILED

SECRETARY OF STATE
SECRET

COVER LETTER

TO: Registration Se Division of Con					
SUBJECT:	Mystrom C	n - must include suffix	on, Inc		
Dear Sir or Madam:					
"Certificate of Existence	ion by Foreign Corporation for e," or "Certificate of Good Sta n corporation to transact busin	nding" and check are subr			
Please return all corresp	ondence concerning this matte	er to the following:			
M	Name of	15trom			
	Name of	ostruction	, Inc		
10	816 Washa	m Potts P	d .		
	Lornelius	ress NC 280	31		
		and Zip code	<u> </u>		
	E-mail address: (to be used	for future annual report no	oufication) HA	MODE CO	214
For further information	concerning this matter, please	call:	JASS		
Michael Name of Person	NyStrom at (704) Area Coo	de Daytime Teleph	one Number	9 FN 1:43	Ö
STREET/COU Registration Sec Division of Cor Clifton Building 2661 Executive Tallahassee, FL	porations 3 Center Circle	MAILING AD Registration Se Division of Cor P.O. Box 6327 Tallahassee, F1	rporations		
Enclosed is a check for	the following amount:				
□ \$70.00 Filing Fee	Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fe Certificate of St Certified Copy		

under the law of which it is incorporated.

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 corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "lnc.," "Co.," "Corp," "lnc," "Co," or "Corp.") Construction Services, Inc enter alternate corporate name adopted for the purpose of transacting business in Florida) (State or country under the law of which it is incorporated) (FE) number, if applicable) (Date of duration, if other than perpetual) (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) (Current mailing address, if different) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Office Address: 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 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) 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

11. Names and business addresses of officers and/or directors:
A. DIRECTORS
Снаігтап:
Address:
Vice Chairman:
Address:
Director: Michael Wystron
Address: 10816 WASHAM POHS Pd Cornelius NC 28031
Director:
Address:
B. OFFICERS
President: Lisa Nustram
Address: 10816 WAShan Rotts Rd Cornelius NC 28031
Audiess. 10010 10 ft. 1000 1000 1000 1000 1000 1000 1000 10
Vin President Michael Wystows
Vice President: Michael Nystrom Address: 10816 Washam Potts Rd Cornelius NC 28031
Address: 10 016 0 110 1411 1611 1611 1611 1611 1
Sacretanus
Secretary:
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 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.
(Typed or printed name and capacity of person signing application)
(a shed or bunned matter and capacity of betson signing application)

04/19/2016 16:11



NORTH CAROLINA Department of the Secretary of State

CERTIFICATE OF EXISTENCE

I, Elaine F. Marshall, Secretary of State of the State of North Carolina, do hereby certify that

NYSTROM CONSTRUCTION, INC.

is a corporation duly incorporated under the laws of the State of North Carolina, having been incorporated on the 20th day of August, 2013, with its period of duration being Perpetual.

I FURTHER certify that, as of the date set forth hereunder, the said corporation's articles of incorporation are not suspended for failure to comply with the Revenue Act of the State of North Carolina; that the said corporation is not administratively dissolved for failure to comply with the provisions of the North Carolina Business Corporation Act; that its most recent annual report required by N.C.G.S. 55-16-22 has been delivered to the Secretary of State; and that the said corporation has not filed articles of dissolution as of the date of this certificate.



Scan to verify online.

Certification# 97952183-1 Reference# 12899465-KC Page: 1 of 1 Verify this certificate online at http://www.sos.nc.gov/verification

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 1st day of February, 2016.

Elaine I Marshall

Secretary of State