

F17000004677

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

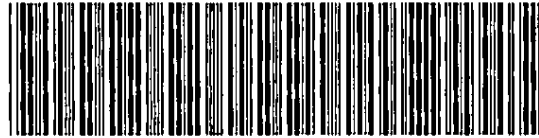
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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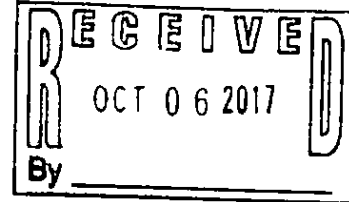
RECEIVED  
OCT 15 2017  
JUL 10 11:00 AM

D. SCOTT  
OCT 15 2017



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

September 27, 2017



TINKER SHARP  
100 E 7TH ST SUITE 201  
KANSAS CITY, MO 64106

SUBJECT: BCCM CONSTRUCTION GROUP, INC.  
Ref. Number: W17000077027

We have received your document for BCCM CONSTRUCTION GROUP, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

✓ A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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 Pijaux  
Regulatory Specialist

Letter Number: 217A00019579

2017 OCT 16 PM 12:28

TALLAHASSEE, FLORIDA

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** BCCM Construction Group 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:

Tinker Sharp  
Name of Person

BCCM Construction Group Inc  
Firm/Company

100 E. 7th Street Suite 201  
Address

Kansas City MO 64106  
City/State and Zip code

tsharp@bceemconstruction.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Tinker Sharp at (816) 659-9115  
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

**MAILING ADDRESS:**

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

Enclosed is a check for the following amount:

- ☒ \$70.00 Filing Fee    ☐ \$78.75 Filing Fee & Certificate of Status    ☐ \$78.75 Filing Fee & Certified Copy    ☐ \$87.50 Filing Fee, 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.*

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

BCCM Construction Group Inc

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Missouri 3. 82-2242217  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 05/19/2017 5. \_\_\_\_\_  
(Date of incorporation) (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)

7. 100 E. 7th Street Suite 201  
(Principal office address)

\_\_\_\_\_  
(Current mailing address, if different)

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

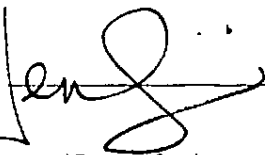
Name: C T Corporation System

Office Address: 1200 South Pine Island Road

Plantation, Florida 33324  
(City) (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 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.*



Jennifer Quinn, Assistant Secretary

(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**

Chairman: Jason Young

Address: 100 E. 7th Street Suite 201

Kansas City MO 64106

Vice Chairman: Doug Hoffman

Address: 100 E. 7th Street Suite 201

Kansas City MO 64106

Director: Ralph Taylor

Address: 100 E. 7th Street Suite 201

Kansas City MO 64106

Director: Sam Petrie

Brad Campbell

Address: 100 E. 7th Street Suite 201

100 E. 7th Street, Suite 201

Kansas City MO 64106

Kansas City MO 64106

**B. OFFICERS**

President: Jason Young

Address: 100 E. 7th Street Suite 201

Kansas City MO 64106

Vice President: Doug Hoffman

Address: 100 E. 7th Street Suite 201

Kansas City MO 64106

Secretary: Sam Petrie

Address: 100 E. 7th Street Suite 201 Kansas City MO 64106

Treasurer: Ralph Taylor

Address: 100 E. 7th Street Suite 201 Kansas City MO 64106

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

12. [Signature]  
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.

13. Jason Young, President

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

# STATE OF MISSOURI



**John R. Ashcroft**  
**Secretary of State**

**CORPORATION DIVISION**  
**CERTIFICATE OF GOOD STANDING**

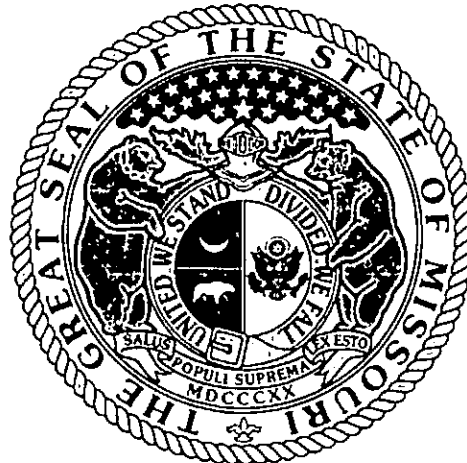
I, JOHN R. ASHCROFT, Secretary of State of the State of Missouri, do hereby certify that the records in my office and in my care and custody reveal that

*BCCM Construction Group, Inc.*  
*001371523*

was created under the laws of this State on the 19th day of May, 2017, and is in good standing, having fully complied with all requirements of this office.

IN TESTIMONY WHEREOF, I hereunto set my hand and cause to be affixed the GREAT SEAL of the State of Missouri. Done at the City of Jefferson, this 28th day of September, 2017.

  
Secretary of State



Certification Number: CERT-09282017-0075