F17000005817

(R	equestor's Name)			
(A	ddress)			
(A	ddress)			
(C	ity/State/Zip/Phone	#)		
PICK-UP	☐ WAIT	MAIL		
(B	usiness Entity Nam	e)		
(Document Number)				
Certified Copies	Certificates	of Status		
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December 5, 2017

JACK PALMERI 401 E LAS OLAS BLVD SUITE 1400 FORT LAUDERDALE, FL 33301

SUBJECT: MANCINI CONCRETE AND MASONRY INC.

Ref. Number: W17000096224

We have received your document for MANCINI CONCRETE AND MASONRY 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):

The registered agent designated must be an active Florida entity or a foreign entity authorized to transact business in Florida. Please correct the document.

The name and title of the person signing the document must be noted beneath or opposite the signature.

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 Pijeaux Regulatory Specialist

Letter Number: 717A00024486

A THE REGISTORD AGENT WAS BROWNET WRIGHT

COVER LETTER

TO:	_	tration Se	etion porations				
			Concrete And Mase	onry Inc.			
SUBJ	ECT:		Name	of corporation	n ·	- must include suffix	
Dear S	Sir or Ma	adam:		•			
"Certif	ficate of	Existenc		e of Good St	ano	ling" and check are sub	et Business in Florida," mitted to register the
Please	return a	all corresp	ondence concerr	ning this matt	er	to the following:	
Jack P	almeri						
	<u> </u>			Name o	f P	erson	
Palmer	ri Law Fi	irm LLC					
				Firm/Co	mŗ	pany	
401 E	Las Olas	Blvd, Sui	te 1400				
	-		-	Add	lre:	SS	
Fort La	auderdale	e, FL 3330	1				
-				City/State	an	d Zip code	
Manci	ni@Palm ———	neriLawFir					
			E-mail addres	ss: (to be used	1 fe	or future annual report i	notification)
For fu	rther inf	ormation	concerning this r	natter, please	e ca	ill:	
Jack Pa	almeri			954		591-9400	
	Name	of Perso	n	at (Area Co	de	Daytime Telep	hone Number
			RIER ADDRES	SS:		MAILING A	
Registration Section Division of Corporations				Registration Section Division of Corporations			
Clifton Building			P.O. Box 6327				
	-	Executive lassee, FL	Center Circle . 32301			Tallahassee, F	L 32314
Enclos	sed is a	check for	the following am	ount:			
\$70	0.00 Fili	ing Fee	□ \$78.75 Filit Certificate			\$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.

Mancini Concre 1.	te And Masonry Inc.			
(Enter name of c "Inc.," "Co.," "C	orporation; must include "INCORPORATED," "(orp," "Inc," "Co," or "Corp.")	COMPANY," "CORPORATIO	N,"	
Delaware	able in Florida, enter alternate corporate name ado	,		
September 22-2	y under the law of which it is incorporated) 017 5.			
(Date	of incorporation)	(Date of duration, if other than perpetual)		
(Date of Registr	ation)			
7	(Date first transacted business in Fl (SEE SECTIONS 607.1501 & 607.1502 baugh Ave, Suite 101, Tampa, FL 33626 (Principal of baugh Ave, Suite 101, Tampa, FL 33626	, F.S., to determine penalty liabi	lity)	
15047 West Blife				
8. Name and street Name:	et address of Florida registered agent: (P.O. E Palmeri Law Firm	ddress, if different) Box NOT acceptable)	17 ETC 28 - 611	
Office Address:	401 E Las Olas Blvd, Suite 1400			
	Fort Lauderdale	33301 . Florida	7:13	
	(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.

(Registered agent's signature)

ACK PALMER I MEMBER

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:	
Address:	
Vice Chairman:	
Address:	
Director:	
Address:	
Director:	
Address:	
B. OFFICERS	
President:	
Address:	28
Vice President:	
Address:	
Jack Palmeri Secretary:	
Address: 13049 West Linebaugh Ave, Suite 101, Tampa, FL 33626	
Treasurer:	
Address:	
NOTE: If necessary, you may attach an addendum to the application listing a	dditional affings and/or directors
12.	admonal officers and/or directors.
Signature of Director or Officer	
The officer or director signing this document (and who is listed in number 11 are true and that he or she is aware that false information submitted in a document a third degree felony as provided for in s.817.155, F.S.	above) affirms that the facts stated herein nent to the Department of State constitutes
13. Jack Palmeri	



I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "MANCINI CONCRETE AND MASONRY INC." IS

DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN

GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE

RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-SIXTH DAY OF OCTOBER,

A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "MANCINI CONCRETE

AND MASONRY INC." WAS INCORPORATED ON THE TWENTY-SECOND DAY OF

SEPTEMBER, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL FRANCHISE TAXES HAVE BEEN ASSESSED TO DATE.



Authentication: 203464962

Date: 10-26-17