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(Reques	stor's Name)					
(Addres	s)					
(Addres	s)					
(City/Sta	ate/Zip/Phone #)					
PICK-UP	WAIT MAIL					
(Busine	ss Entity Name)					
(Document Number)						
Certified Copies	Certificates of Status					
Speciał Instructions to Filing Officer:						
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COVER LETTER

TO:	Registration Section Division of Corporations					
cuni	Venti	ure Management & Re	construction.	, Inc.		
SUBJ	EC1:	Name	of corpora	tion - mu	st include suffix	
Dear S	Sir or Madam:	:				
"Certi	ficate of Exis	tence," or "Certifica	e of Good	Standing	" and check are subm	
		rrespondence concer	ning this ma	atter to th	e following:	
			Name	of Perso	n	
Ventu	re Managemen	t & Reconstruction, In-	: .			
			Firm/0	Company		
8230 F						
Conco	rd, NC 28027					
		,	City/Sta	te and Zi	p code	
patrici	a@venture-gc.	com				
		E-mail addre	ss: (to be us	ed for fu	ture annual report not	ification)
For fu	rther informa	tion concerning this	matter, plea	ise call:		
Marya	Goodnight			2	13-2845	
	Name of P	erson	- \	Code	Daytime Telepho	ne Number
	Registration Division of Clifton Bui 2661 Execu	n Section Corporations Iding Itive Center Circle	SS:		Registration Sec Division of Corp P.O. Box 6327	tion porations
Enclos	sed is a check	for the following an	nount:			
□ \$7	0.00 Filing Fe					Certificate of Status &

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	ement & Reconstruction, Inc. orporation; must include "INCORPORATED.	" "COMBANY " "CODBODATIO	<u> </u>	
	orp." "Inc," "Co," or "Corp.")	COMPANT, CORPORATIO	ν,	
(If name unavaila	able in Florida, enter alternate corporate name	adopted for the purpose of transacti	ng business in Florida)	
North Carolina	3.	26-0614302		
(State or countr 08/02/2007	y under the law of which it is incorporated)	(FEI number, if applicable) 5.		
(Date	of incorporation)	(Date of duration, if other	r than perpetual)	
8230 Poplar Tent	(SEE SECTIONS 607.1501 & 607.1 Road, Suite 101, Concord, NC 28027		lity)	
	(Fillici	pal office address)		
	(Current maili	ing address, if different)	60	
. Name and stree	et address of Florida registered agent: (P.	O. Box NOT acceptable)	<u>1</u>	
Name:	Martin R. Williams			
Office Address:	712 S. Howard Ave., #210			
	Tampa	, Florida	··· (2) ·*-	
	(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.

Mart A William (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: ___ Martin R. Williams 8230 Poplar Tent Road, Suite 101 Address: Concord, NC 28027 Patricia S. Williams Vice Chairman: 8230 Poplar Tent Road, Suite 101 Address: Concord, NC 28027 Address: ____ Address: _ B. OFFICERS Martin R. Williams President: 8230 Poplar Tent Road, Suite 101 Address: Concord, NC 28027 Vice President: Patricia S. Williams Secretary: 8230 Poplar Tent Road, Suite 101, Concord, NC 28027 Address: Treasurer: 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.

Martin R. Williams



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

VENTURE MANAGEMENT & RECONSTRUCTION INC.

is a corporation duly incorporated under the laws of the State of North Carolina, having been incorporated on the 2nd day of August, 2007, 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.

of Raleigh, this 23rd day of May, 2018.

Claime J. Marshall

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City

Secretary of State