

Y SCOTT
Help
JUN 13 2019

(((H19000184813 3)))

COVER LETTER**TO:** Registration Section
Division of Corporations**SUBJECT:** NORTHEDGE CONSTRUCTION, 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:

LISA ADAMS

Name of Person

LICENSES, ETC., INC.

Firm/Company

886 110TH AVE. N., SUITE 6

Address

NAPLES, FL 34108

City/State and Zip code

SUPPORT@LICENSESETC.COM

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

For further information concerning this matter, please call:

LISA ADAMS

239 777-1028
at ()

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

(((H19000184813 3)))

(((H19000184813 3)))

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.

NORTH RIDGE CONSTRUCTION, INC.

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

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

NORTH DAKOTA

2. _____ 3. 46-0629657
(State or country under the law of which it is incorporated) (FEI number, if applicable)

06/27/2012

4. _____ 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)

1551 28TH AVE. S., SUITE L, GRAND FORKS, ND 58201

7. _____
(Principal office address)

1551 28TH AVE. S., SUITE L, GRAND FORKS, ND 58201

(Current mailing address, if different)

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

Name:

LICENSES, ETC., INC.

Office Address:

836 110TH AVE. N., SUITE 6

NAPLES

(City)

Florida 34108

(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)

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.

(((H19000184813 3)))

(((H19000184813 3)))

11. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: JON MISKAVIGE

Address: 1551 28TH AVE. S., SUITE L

GRAND FORKS, ND 58201

Vice President: JEREMY MISKAVIGE

Address: 1551 28TH AVE. S., SUITE L

GRAND FORKS, ND 58201

Executive Vice President: RYAN CARLSON

Address: 1551 28TH AVE. S., SUITE L, GRAND FORKS, ND 58201

Treasurer: _____

Address: _____

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

12. _____

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. JON MISKAVIGE, PRESIDENT

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

(((H19000184813 3)))

State of North Dakota

SECRETARY OF STATE



Certificate of Good Standing of NORTHRIDGE CONSTRUCTION, INC.

SOS Control ID#: 0000118908

Certificate #: 016764431

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2019 JUN 12 PM 4: 06

FILED

The undersigned, as Secretary of State of the state of North Dakota, hereby certifies that, according to the records of this office,

NORTHRIDGE CONSTRUCTION, INC.

a Corporation - Business - Domestic was formed under the laws of NORTH DAKOTA and filed with this office effective June 27, 2012. This entity has, as of the date set forth below, complied with all applicable North Dakota laws.

ACCORDINGLY, the undersigned, as such Secretary of State, and by virtue of the authority vested in him by law, hereby issues this Certificate of Good Standing.

DATE: June 11, 2019

Alvin A. Jaeger
Secretary of State