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Office Use Only



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## COVER LETTER

_	istration Section sion of Corporations			<b>↓</b>	
SUBJECT	CODE Construction Samina and Ta	xas, Inc.			
SUBJECT		poration -	must include suffix		
Dear Sir or l	Madam:			102	
"Certificate	d "Application by Foreign Corpora of Existence," or "Certificate of Go need foreign corporation to transac	ood Stand:	ng" and check are subr		
Please return	all correspondence concerning th	is matter t	o the following:	P	
Shawn Glass	er			2: h	
	1	Name of Po	erson	र्जुं ज	
CCG Service	s, Inc.			,	
	F	irm/Comp	any		
10625 N. Cor	anty Rd.				
		Addres	S		
Frisco, TX 7	50333				
	Cit	y/State and	l Zip code		
shawnglasser	@ceg-services.com				
	E-mail address: (to	be used fo	r future annual report n	otification)	
For further i	nformation concerning this matter.	, please ca	ll:		
Shawn Glass	at ( 214 ) 618-2107				
Nai	ne of Person A	rea Code	Daytime Telepl	none Number	
STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		
	a check for the following amount: check payable to: <b>FLORIDA DEPAR</b> iling Fee S78.75 Filing Fee Certificate of Sta	: &	OF STATE \$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, 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.

(If name unavails	able in Florida, enter alternate corporate name adopte	ed for the purpose of transacting bus	iness in Flo	orida)	
Texas	3				
(State or countr	y under the law of which it is incorporated)	(FEI number, if application	ble)		
4. 10/18/1990	5			_	
(Date	of incorporation)	(Date of duration, if other than perpetual)			
6 <u></u>					-
	(Date first transacted business in Flor (SEE SECTIONS 607.1501 & 607.1502, F	ida, if prior to registration) .S., to determine penalty liability)	SECK: ALLA!	10Z0 JUN	سر.
77	Rd. Frisco, TX 75033	. 11	105.	<u> </u>	
(Principal office street address)					
<del></del>	(Current mailing add	lress if different)	1116	PH	
			EL DRUBA	2: 49	*
8. Name and stre	et address of Florida registered agent: (P.O. Bo	X NOT acceptable)	-		
Name:	CAPITOL CORPORATE SERVICES, INC.	•			
Office Address:	515 EAST PARK AVENUE 2ND FL	_			
	TALLAHASSEE	Florida 32301			
	(City)	_, Florida			
					place

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. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

A. DIRECTORS	Garv Frazier		William P. Cox		
□Chairman	Name:	□Chairman	Name:		
□Vice Chairman	Address: 10625 N. County Rd.	□ Vice Chairman			
□Director	Frisco. TX 75033	□Director	Frisco, TX 75033		
■ President		□President			
□Vice President		■ Vice President			
Secretary	Treasurer	□Secretary	□Treasurer		
□Other		Other			
□Chairman	Mark A. Steffen	□Chairman			
	Address:	□Vice Chairman	Address: County Rd.		
☐ Director	Frisco, TX 75033	□Director	Frisco, TX 750337 😅 📮		
□President		□President	2: L9		
□Vice President		□Vice President			
Secretary	☐Treasurer	□ Secretary	Treasurer		
Other	□ Other	Other	Other		
□Chairman	Name:	□Chairman	Name:		
□Vice Chairman	Address:	□Vice Chairman	Address:		
□Director		□Director			
□President		□President			
□Vice President		□Vice President			
Secretary	□Treasurer	□Secretary	□Treasurer		
□Other	□Other	□Other	Other		
individuals may	:: Use an attachment to report more than six (6). The a be added to the index when filing your Florida Depart	iment of State Annuar	Report form.		
12.	Signature of Director	or or Officer			
1:	rector signing this document (and who is listed in nun false information submitted in a document to the Dep	ober 11 above) affirms	that the facts stated herein are true and that he		

13. Mark A. Steffen, Secretary

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

s.817.155, F.S.



### Office of the Secretary of State

#### Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Articles Of Incorporation for Core Construction Services of Texas, Inc. (file number 116978900), a Domestic For-Profit Corporation, was filed in this office on October 18, 1990.

It is further certified that the entity status in Texas is in existence.

It is further certified that our records indicate GARY A FRAZIER as the designated registered agent for the above named entity and the designated registered office for said entity is as follows:

10625 NORTH COUNTY ROAD

FRISCO, TX - 75033 USA

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on June 03, 2020.



Phone: (512) 463-5555

Draward by: SOS\_WEE

Ruth R. Hughs Secretary of State