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AUG 13 2021 M. SOLOMON

COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: CONCEPT CONSTRUCTION SERVICES 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:

REBECCA C. ROMULUS, ESQ.

	Name of Pe	rson	
KOMMER BAVE & OLLMAN, LLP			
	Firm/Compa	ny	
145 HUGUENOT STREET, SUITE 402			
	Address		
NEW ROCHELLE, NEW YORK 10801			
	City/State and	Zip code	
RROMULUS@KBOATTORNEYS.COM			
E-mail addres	s: (to be used for i	future annual report	notification)
REBECCA C. ROMULUS	_ at ()	633-7400	
Name of Person	Area Code	Daytime Teler	phone Number
STREET/COURIER ADDRES Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite \$10 Tallahassee, FL 32303		MAILING A Registration S Division of C P.O. Box 632 Tallahassee. I	Section Forporations 7
Enclosed is a check for the following ame Please make check payable to: FLORIDA D S70.00 Filing Fee S78.75 Filin	EPARTMENT OF g Fee & 🛛 \$7;	STATE 8.75 Filing Fee &	■ \$87.50 Filing Fee,
Certificate of	of Status Ce	rtified Copy	Certificate of Status &

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.

CONCEPT CONSTRUCTION SERVICES INC.

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

CONCEPT CSI

(If name unavai	lable in Florida, enter alternate corporate name	adopted for the purpose of transacting business in Flo	rida)
NEW YORK	3.		
(State or count	ry under the law of which it is incorporated)	(FEI number, if applicable)	
06/22/2005	5.		
(Date	5.	(Date of duration, if other than perpetual)	
	(Date first transacted business in	n Florida, if prior to registration) i02, F.S., to determine penalty liability)	
124 EAST 124T	H STREET NEW YORK, NEW YORK 10035	2nd Floor	
	(Principal offi	ce <u>street</u> address)	
	(Current mailin	g address, if different)	
			::
Name and stree	et address of Florida registered agent: (P.O	Box <u>NOT</u> acceptable)	•
Name:	BLUMBERGEXCELSIOR CORPORATE SEF	RVICES, INC.	
ffice Address:	155 OFFICE PLAZA DR., 1ST FL		54 1 m
	TALLAHASSEE	Florida 32301	ייי כי די
	(City)	(Zip code)	_

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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.



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.

A. DIRECTORS

Chairman	Scan Mulleady Name:		Thomas Moroney	
□Vice Chairman	Address:	🗇 Vice Chairman	124 Fast 124th Street 2nd Pla	
Director	New York, New York 10035	DDirector	New York, New York 10035	
□ President		President		
ClVice President		□Vice President		
Secretary	Treasurer	Secretary	⊡Treasurer	_
CEO	Other	□0ther	0ther	
☐ Chairman	Name:	□Chairman	Name:	
□Vice Chairman	Address:		Address:	
Director		Director		
□President		□President		
O Vice President		□Vice President		
□ Secretary	Treasurer	Secretary	Treasurer	
🗆 Other	ÜOther	[]Other	Other	
□Chairman i	Name:	□Chairman N	Veme:	
	Address:		· · · · · · · · · · · · · · · · · · ·	
Director _			Address:	<u>ب</u>
DPresident		- President	:-	201 N
□Vice President	·	□Vice President _		
Secretary	Treasurer	Secretary		
Other	Other	□0lber	[]Other	
Important Notice: Use individuals may be ad	an attachment to report more than six (6). The atta ded to the index when filing your Forida Deputm	achment will be imaged fo ent of State Annual Repor	or reporting purposes only, Non-index rt form.	ed
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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. Sean Mulleady, Chief Executive Officer

STATE OF NEW YORK

DEPARTMENT OF STATE

Certificate of Status

I, ROSSANA ROSADO, Secretary of State of the State of New York and custodian of the records required by law to be filed in my office, do hereby certify that upon a diligent examination of the records of the Department of State, as of the date and time of this certificate, the following entity information is reflected:

Entity Name:	CONCEPT CONSTRUCTION SERVICES INC.
DOS ID Number:	3221802
Entity Type:	DOMESTIC BUSINESS CORPORATION
Entity Status:	EXISTING
Date of Initial Filing with DOS:	06/22/2005
Statement Status:	CURRENT
Statement Due Date:	06/30/2021

I certify that the following is a list of documents on file in the Department of State for said entity:

Document Type: Date of Filing: Entity Name:	CERTIFICATE OF INCORPORATION 06/22/2005 CONCEPT BUILDERS CORP.	
Document Type:	CERTIFICATE OF AMENDMENT	
Date of Filing:	07/22/2005	
Name Changed To:	CONCEPT CONSTRUCTION SERVICES INC.	
Document Type:	BIENNIAL STATEMENT	
Date of Filing:	07/11/2007	
Effective Date:	06/01/2007	
		Page 1 of 3

Document Type:	BIENNIAL STATEMENT	
Date of Filing:	06/23/2009	
Effective Date:	06/01/2009	
Document Type:	BIENNIAL STATEMENT	
Date of Filing:	09/14/2011	
Effective Date:	06/01/2011	
Document Type:	BIENNIAL STATEMENT	
Date of Filing:	06/10/2013	
Effective Date:	06/01/2013	
Document Type:	BIENNIAL STATEMENT	
Date of Filing:	01/18/2019	
Effective Date:	06/01/2017	
Document Type:	CERTIFICATE OF CHANGE	
Date of Filing:	03/28/2019	
Document Type:	BIENNIAL STATEMENT	
Date of Filing:	06/04/2019	
Effective Date:	06/01/2019	
Document Type:	AMENDMENT TO BIENNIAL STATEMENT	
Date of Filing:	06/20/2019	
Effective Date:	06/01/2019	
Enecuve Date:	00/01/2017	

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Above space is left blank intentionally.

No information is available from this office regarding the financial condition, business activity or practices of this entity.



WITNESS my hand and official seal of the Department of State, at the City of Albany, on July 08, 2021 at 03:29 P.M.

ROSSANA ROSADO, Secretary of State

Brandon C. Hughes

By Brendan C. Hughes Executive Deputy Secretary of State

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