Division of Corporations

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (813)436-5206

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FOREIGN PROFIT/NONPROFIT CORPORATION A&M Masonry Inc

Certificate of Status	0
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Help

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. A&M Masonry In	nc			
(Enter name of c	orporation; must include "INCORPORATED," " forp," "Inc," "Co," or "Corp,")	COMPANY," "CORPORATION		
A&M Masonry S	services inc			
(If name unavail	able in Florida, enter alternate corporate name add	opted for the purpose of transacting	business in Floric	la)
Georgia	2			
(State or country under the law of which it is incorporated)		(Firl number, if applicable)		
06/02/2015	5			
(Date of incorporation) 5.		(Date of duration, if other than perpetual)		
			, ,	
7901 4th St N ST	(SEE SECTIONS 607.1501 & 607.1502 E 300 St. Petersburg FL 33702			
7001 Alb CLN CT	(Principal office	<u>street</u> address)		
7901 4(1) 5(19 5)	E 300 St. Petersburg FL 33702			
	(Current mailing a	ddress, if different)		
R. Name and <u>stree</u> Name:	et <u>address</u> of Florida registered agent: (P.O. F Northwest Registered Agent LLC	Box <u>NOT</u> acceptable)	:	71171 6170
Office Address:	7901 4th St N STE 300		٠. ر	y Y
	St. Petersburg	Florida		દ
	(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)

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	Name: SANTANA FLORES, SANTOS	□ Chairman	Name:			
□Vice Chairman	Address:	□Vice Chairman	Address:			
 Director	7901 4th St N STE 300	□Director				
⊠President	St. Petersburg FL 33702	□President				
□Vice President		□Vice President				
⊠Secretary	X Treasurer	☐Secretary	☐ Treasurer			
Other	□Other	□Other	Other			
□Chairman	Name:	□Chairman	Name:			
LIVice Chairman	Address:	□Vice Chairman				
Director		□Director				
□President		□President				
□Vice President		□Vice President				
□ Secretary	☐ Treasurer	□Secretary	□1'reasurer			
□Other	Other	Other	□Other			
□Chairman	Name:	□Chairman	Name:			
□Vice Chairman	Address:	□Vice Chairman	Address:			
DDirector		□ Director				
□President		□President				
□Vice President		□Vice President				
Secretary	Treasurer	□ Secretary	☐ Treasurer			
Other	Other	□Other				
Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form. 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.

Typed or printed name and capacity of person signing application)

Fax: 81343652

Control Number: 15055416

STATE OF GEORGIA

Secretary of State

Corporations Division 313 West Tower 2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530

CERTIFICATE OF EXISTENCE

1. Brad Raffensperger, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

A&M MASONRY INC

a Domestic Profit Corporation

was formed in the jurisdiction stated below or was authorized to transact business in Georgia on the below date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

Docket Number : 26093317 Date Inc/Auth/Filed: 06/02/2015 Jurisdiction : Georgia Print Date : 09/13/2023

Form Number 211



Brad Raffonsperger

Brad Raffensperger Secretary of State