Division of Corporations

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Division of Corporations

(850)517-6383

REGISTERED AGENTS INC. Account Name

Account Yumber

12229020223

Phone Fax Number (32/)282-2863 (813)436-5206

Enter the email address for this business entity to be used for future $% \left(\frac{1}{2}\right) =\left(\frac{1}{2}\right) ^{2}$ annual report mailings. Enter only one email address please.

Email Address:_

FOREIGN PROFIT/NONPROFIT CORPORATION LINDSTROM & SON CONSTRUCTION, INC.

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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.

LINDSTROM &	SON CONSTRUCTION, INC.				
(Enter name of c	orporation; must include "INCORPORATE orp," "Inc." "Co," or "Corp,")	D," "COMPANY," "CORPOR	ATION,"	_	
(II name unavail	able in Florida, enter alternate corporate nai	ne adopted for the purpose of trai	nsacting business in Florida)	
2. Washington		3.	_		
(State or countr	y under the law of which it is incorporated)	(FE) number	r, ii applicable)	_	
4. 06/23/1993		5.			
(Date	(Date of incorporation)		(Date of duration, if other than perpetual)		
6.					
	(Date first transacted busines (SEE SECTIONS 607.1501 & 607	is in Florida, if prior to registratio 7,1502, F.S., to determine penalty			
7 14 Lindstrom Lan-	e PO Box 288 Chinook, WA 98614				
·	(Principal c	office street address)			
7901 4th St N ST	E 300 St. Petersburg, FL 33702				
*******	(Current ma	iling address, if differenti		•	
8. Name and <u>strec</u> Name:	<u>et address</u> of Florida registered agent: (I Northwest Registered Agent LLC	P.O. Box NOT acceptable)	<u> </u>	G	
Office Address:	7901 4th St N STE 300		; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ;		
Write Address.	St. Petersburg	. Florida (Zip code)			
	(City)	(Zip code)	က	* (
designated in this	ent's acceptance: ed as registered agent and to accept se application, I hereby accept the appoin omply with the provisions of all statute	ntment as registered agent an	d agree to act in this cap	acity. 1	
	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.

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A. DIRECTORS				
□Chairman	Same Gregg Lindstrom	Chairman	Namer	<u> </u>
□Vice Chairman	Address:	□ Vice Chairman	Address:	
X Director	7901 4th St N STE 300	_Director		
XiPresident	St. Petersburg, FL 33702	□ President		
□Vice President		□ Vice President		
X ¹ Secretary	X Treasurer	Z Secretary		Ti Tiensurer
[]Other		Other		* [Other
□C harrman	Name:	∐ Chairman	Name:	
⊡Vice Chanman	Address:	□ Vice Chairman	Address:	
TiDirector		¹¹ Ducctor		
□President		1. President		<u> </u>
□Vice President		T. Vice President		
□ Secretary	☐ Treasurer	☐ Secretary		Treasurer
ElOther		COther		HOther
□ Chairman	Name:	II Chanman	Name:	
LIVice Chairman	Address:	Vice Chairman	Address:	· · -
Director		Director		
□President		II President		
CiVice President		[Vice President		<u> </u>
Z.Secretary	☐ Treasurer	III Secretary		: Treasurer
□Other	Other	□Other		二Other
	lise an attachment to report more than six (6). The attact added to the index when filing your Florida Departme May Lindstra Signature of Director o	nt of State Annual Re	eport form.	rposes only Non-indexed
The officer or direc	etor signing this document (and who is listed in number			

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 8.817.155, F.S.



Secretary of State

I, STEVE R. HOBBS, Secretary of State of the State of Washington and custodian of its seal, hereby issue this

CERTIFICATE OF EXISTENCE

OF

LINDSTROM & SON CONSTRUCTION, INC.

I CERTIFY that the records on file in this office show that the above named entity was formed under the laws of the State of Washington and that its public organic record was filed in Washington and became effective on 06/23/1993.

LEURTHER CERTIFY that the entity's duration is Perpetual, and that as of the date of this certificate, the records of the Secretary of State do not reflect that this entity has been dissolved.

I FURTHER CERTIFY that all fees, interest, and penalties owed and collected through the Secretary of State have been paid.

I FURTHER CERTIFY that the most recent annual report has been delivered to the Secretary of State for filing and that proceedings for administrative dissolution are not pending.

Issued Date: 05/15/2024 UBI Number: 601 474 525



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Stella R. H. Shy Seventian of State

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