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(Requestor's Name)					
(Address)					
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(City/State/Zip/Phone #)					
(City/State/ZIp/Fhorie #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					





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COVER LETTER

TO:	2: Registration Section Division of Corporations				
SUBJ	ECT:	DACO Construction Company	y Incorporated		
		Name o	f corporation	must include suffix	
Dear S	ir or M	adam:			
"Certif	icate of	"Application by Foreign Cor Existence," or "Certificate a ced foreign corporation to tra	of Good Stand	ing" and check are subm	
Please	return :	all correspondence concernit	ng this matter	to the following:	
Nicole	Morfi				
-			Name of P	erson	
DACO	Constri	action Company Incorporated			
		•	Firm/Comp	oany	
311 W	Norfolk	Ave STE 200			
		· · · · · · · · · · · · · · · · · · ·	Addre	SS	
Norfoll	k, NE 6	8701			
			City/State an	d Zip code	
nicole	a degda				
		E-mail address:	(to be used fo	or future annual report no	tification)
For fur	ther in	formation concerning this ma	atter, please ca	dl:	
Connie	Name of Person Area Code Daytime Telephone Num				
	Name	e of Person	Area Code	Daytime Telepho	one Number
	Regis Divis The C 2415	EET/COURIER ADDRESS tration Section ion of Corporations Centre of Tallahassee N. Monroe Street, Suite 810 hassee, FL 32303	S:	MAILING AD Registration Sec Division of Cor P.O. Box 6327 Tallahassee, FL	ction porations
Please	make ch	check for the following amo eck payable to: FLORIDA DE ing Fee	PARTMENT g Fee &	OF STATE \$78.75 Filing Fee & Certified Copy	■ \$87.50 Filing Fee. Certificate of Status & Certified Copy

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.

he law of which it is incorporated) 5 poration)	(FEI number, if applicat	ble)
poration) 5		
poration) 5		
	(Date of duration, if other than p	are atuals
		erpettar)
	 	
(Date first transacted business in Fl (SEE SECTIONS 607.1501 & 607.1502	lorida, if prior to registration) , F.S., to determine penalty liability)	
200, Norfolk, NE 68701		
(Principal office	street address)	
	11 12 1123	
(Current mailing a	adress, if different)	2024
as of Florida registered agent: (P.O. F	Box <u>NOT</u> acceptable)	Zúza COT
ess Filings Incorporated		:2
South Pine Island Road		
		ယ္
(City)	(Zip code)	59
1	(Current mailing a ss of Florida registered agent: (P.O. Foess Filings Incorporated South Pine Island Road ation (City) ceptance: egistered agent and to accept service ation, I hereby accept the appointment	(Current mailing address, if different) ss of Florida registered agent: (P.O. Box NOT acceptable) ness Filings Incorporated South Pine Island Road ation . Florida 33324 (City) (Zip code)

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

under the law of which it is incorporated.

the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction

A. DIRECTORS							
⊒Chairman	Name; Connie J. Geary	□Chairman	Name: Daniel E. Geary				
□Vice Chairman	Address: 311 W Norfolk Ave STE 200	□Vice Chairman	Address: M. Norfolk Ave STE 200				
∄ Director	Norfolk, NE 68701	Director	Norfolk, NE 68701				
■President		□President					
□Vice President		■Vice President					
■ Secretary	□Treasurer	□Secretary	Treasurer				
□Other		□Other					
□Chairman □Vice Chairman ■Director	Name: Aaron D. Geary 311 W Norfolk Ave STE 200 Address: Norfolk, NE 68701	□Chairman □Vice Chairman ■Director	Name: Daniette Henry Address: Norfolk, NE 68701				
□President		□President					
■ 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	☐ Freasurer				
□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. State Annual Report form. 14. State 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 \$817,155, F.S. Connie J. Geary, President							

STATE OF NEBRASKA

United States of America, } ss. State of Nebraska

Secretary of State State Capitol Lincoln, Nebraska

I, Robert B. Evnen, Secretary of State of the State of Nebraska, do hereby certify that

DACO CONSTRUCTION COMPANY, INC.

incorporated on February 3, 1981 and is duly incorporated under the law of Nebraska;

that no occupation taxes due from and assessable against the Corporation are unpaid and have become delinquent;

that no annual or biennial report required to be forwarded by the Corporation to the Secretary of State has become delinquent;

that Articles of Dissolution have not been filed.

This certificate is not to be construed as an endorsement. recommendation, or notice of approval of the entity's financial condition or business activities and practices.

In Testimony Whereof,



I have hereunto set my hand and affixed the Great Scal of the State of Nebraska on this date of

September 25, 2024

Secretary of State

When Some