Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

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(((H15000004493 3)))



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: QT

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name

Account Number : 104662003400

: (516)935-3940

Phone Fax Number

: (800)293-4075

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

FLORIDA LIMITED LIABILITY CO.

Southern Construction & Renovation LLC

Certificate of Status	1
Certified Copy	0
Page Count	92 03
Estimated Charge	\$130.00

B. BOSTICK

Resubmit 1/8

JAN - 9 2015

EXAMINER

H15000004493

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		nstruction & Renovation LLC
(Must end with the	words "Limited Liability Company, "L.L,C,," or "LLC,")
ARTICLE II - Addre The mailing address at		the principal office of the Limited Liability Company is
Principal Office Add	ress:	Mailing Address:
1545 Kais Street		1545 Kais Street
		TO TO TRAIS CITOCI
ARTICLE III - Regis		Baker, FL 32531 stered Office, & Registered Agent's Signature:
ARTICLE III - Regis The Limited Liability mother business entity	Company cannot s y with an active Flo ida street address o	Baker, FL 32531 stored Office, & Registered Agent's Signature: erve as its own Registered Agent. You must designate an individual
ARTICLE III - Regis The Limited Liability mother business entity	Company cannot s y with an active Flo	Baker, FL 32531 stored Office, & Registered Agent's Signature: erve as its own Registered Agent. You must designate an individual rida registration.) f the registered agent are:
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ARTICLE III - Regis The Limited Liability mother business entity	Company cannot s y with an active Flo ida street address o John Fogel 1545 Kais Str	Baker, FL 32531 stored Office, & Registered Agent's Signature: erve as its own Registered Agent. You must designate an individual rida registration.) f the registered agent are: Name
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Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate. 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in

Chapter 603, F.S.

Registered Agent's Signature (REQUIRED)

John Fogel

(CONTINUED)

Page 1 of 2

2015 JAN -8 A 8: 03

H15000004493

Title: "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	
AMBR	John Fogel
	1545 Kais Street
	Baker, FL 32531
_AMBR	Gary Triche
	5655 Grandson's Way
	Baker, FL 32531
(Use attachment if necessary) EV: Effective date, if other than the decive date is listed, the date must be of filing.)	ate of tiling:
E V: Effective date, if other than the deceive date is listed, the date must be	ate of filing:
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E V: Effective date, if other than the detrive date is listed, the date must be of filing.) E VI: Other provisions, if any. REOUIRED SIGNATURE: Signature of a (In accordance with section)	member or an authorized representative of a member. on 605.0203 (1) (b), Florida Statutes, the execution of this docume
E V: Effective date, if other than the detrive date is listed, the date must be of filing.) E VI: Other provisions, if any. REOUIRED SIGNATURE: Signature of a (In accordance with section constitutes an affirmation I am aware that any false	member or an authorized representative of a member. on 605.0203 (1) (b), Florida Statutes, the execution of this document under the penalties of perjury that the facts stated herein are true, information submitted in a document to the Department of Statutes.
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January 8, 2015

FLORIDA DEPARTMENT OF STATE
Division of Corporations

HUBÇO

SUBJECT: SOUTHERN CONSTRUCTION & RENOVATION LLC

REF: W15000001237

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The signatures not legible.,

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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Barbara Bostick Regulatory Specialist II FAX Aud. #: B15000004493 Letter Number: 315A00000350

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