L22000534933

| (Re | equestor's Name) | |
|-------------------------|--------------------|-----------|
| (Ad | dress) | |
| (Ad | dress) | |
| (Cit | :y/State/Zip/Phone | ÷ #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bu | siness Entity Nam | ne) |
| (Ďo | ocument Number) | |
| Certified Copies | _ Certificates | of Status |
| Special Instructions to | Filing Officer: | |
| | | |
| | | |
| | | |

Office Use Only



400399345144

SECRETARY OF COMMAND AND ANASSES FLORIDGE

FILED

20201 27 1311:22

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

| Thone. 330 330 1300 |
|--|
| ACCOUNT NO. : I2000000195 |
| REFERENCE : 290747 7193352 |
| AUTHORIZATION: |
| COST LIMIT : \$ 160.00 |
| ORDER DATE : December 27, 2022 |
| ORDER TIME : 9:04 AM |
| ORDER NO. : 290747-005 |
| CUSTOMER NO: 7193352 |
| |
| DOMESTIC FILING |
| NAME: SGC SURVEYING & MAPPING LLC |
| |
| EFFECTIVE DATE: |
| ARTICLES OF INCORPORATION CERTIFICATE OF LIMITED PARTNERSHIP XX ARTICLES OF ORGANIZATION |
| |
| PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: |
| XX CERTIFIED COPY PLAIN STAMPED COPY |
| XX CERTIFICATE OF GOOD STANDING |
| CONTACT PERSON: Alexxis Weiland - EXT. |

EXAMINER'S INITIALS:

COVER LETTER

| | w Filing Section vision of Corporations | ; | | | |
|----------------|--|-------------------------------|---------------|--|---|
| SUBJECT | SGC Surveying & Ma | | | | |
| 5000000 | | Name of Lin | nited Liabili | ty Company | |
| The enclose | ed Articles of Organizat | ion and fee(s) are | submitted | for filing. | |
| Please retur | n all correspondence co | ncerning this ma | tter to the f | ollowing: | |
| | Anne-Mette Andersen | | | | |
| | • | | Name of | Person | |
| | Holland & Knight LLP | , | | | |
| | | - " | Firm/Co: | npany | |
| | 31 W 52nd Street 12th | Floor | | | |
| | · - - | - | Addr | ess | - |
| | New York, NY 10025 | | | | |
| | | C | ity/State and | l Zip Code | |
| - - | manders@hklaw.com | | Co C | nnual report notificati | |
| | | • | | muai report nou neau | on) |
| For further in | formation concerning th | nis matter, please | call: | | |
| | Anne-Mette Andersen | 64 at (| | 223-0637) | |
| | Name of Person | n Ar | rea Code | Daytime Telephone | e Number |
| Enclosed is | a check for the followir | ig amount: | | | |
| □\$125.00 | | 00 Filing Fee & ate of Status | Certific | i.00 Filing Fee & ad Copy of Copy is enclosed) | ■\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) |
| | Mailing Address New Filing Section Division of Corporation P.O. Box 6327 | n orations | | Street Address New Filing Section Di The Centre of Tallaha 2415 N. Monroe Street | issee et, Suite 810 |

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| ARTICLE I - Name: | | | | |
|---|---------------------------|------------------------|---|---|
| The name of the Limited Liability | y Company is: | | | |
| | | | | |
| SGC Surveying & Ma | apping LLC | | | |
| | | Liability Comp | any, "L.L.C.," or "LLC.") | |
| | | | | |
| ARTICLE II - Address: | idana a Arton anto ata at | -000415 | Saddishiis Communic | |
| The mailing address and street ac | idress of the principal | office of the Lin | ited Liability Company is: | |
| <u>Principa</u> | al Office Address: | | Mailing Address: | |
| 156-B Raceway Driv | e | | 156-B Raceway Drive | |
| Mooresville, NC 281 | 17 | | Mooresville, NC 28117 | |
| | | | | |
| ARTICLE III - Registered Age (The Limited Liability Company another business entity with an a | cannot serve as its own | n Registered Ag | Agent's Signature: ent. You must designate an individual o | r |
| The name and the Florida street a | ddress of the registere | d agent are: | | |
| | Corporation Service | Company | | |
| | | Name | | |
| | 1201 Havs Street | | | |
| | Florida street addre | ss (P.O. Box <u>N(</u> | T acceptable) | |
| | Tallahassee | FL | 32301 | |
| | City | State | Zip | |

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 605, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Cleanis Walted, assistent va president



ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

| Title: | Name and Address: |
|--|---|
| "AMBR" = Authorized Men | nber |
| "MGR" = Manager | |
| AMBR | SGC Engineering LLC |
| | 156-B Raceway Drive |
| | Mooresville, NC 28117 |
| MGR | Robert Keith Lanev |
| | 408 Bank St. NE |
| | Decatur, AL 35603 |
| MGR | Heath McCleskev |
| | 408 Bank St, NE |
| | Decatur, AL 35603 |
| MGR | William Andrew Eades |
| | 156-B Raceway Drive |
| | Mooresville, NC 28117 |
| (Use attachment if necessary | y') |
| an effective date is listed, the date date of filing.) | than the date of filing: <u>January 1, 2023</u> . (OPTIONAL) e must be specific and cannot be more than five business days prior to or 90 days after ck does not meet the applicable statutory filing requirements, this date will not be listed a Department of State's records. |
| TICLE VI: Other provisions, if any | y. |
| | |
| <u>REOUIRED</u> SIGNATURE | Statt McClube |
| | |

Signature of a member or an authorized representative of a member. This document is executed in accordance with section 605.0203 (1) (b). Florida Statutes. I am aware that any 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.

Heath McCleskey Authorized Representative of SGC Engineering LLC Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)