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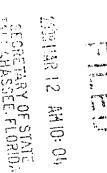
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Office Use Only



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T. CLINE
MAR 1 3 2008
EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: TRIPLE ONSTRUCTION LLC (Name of Limited Liability Company)		
The enclosed "Application by Foreign Limited Liability Company for Authorization to Trans Florida," Certificate of Existence, and check are submitted to register the above referenced for liability company to transact business in Florida		
Please return all correspondence concerning this matter to the following:		
KEVIN KIRCHHARR (Name of Person)		
TRIPLE H CONSTRUCTION, LLC	<u> </u>	
23505 LAWRENCE MOSECEY BD	<u> </u>	
1) BER 15DALE, AL 3656 7 (City/State and Zip Code)		e e e e e e e e e e e e e e e e e e e
(City/Staté and Zip Code)		ال باست 1844
For further information concerning this matter, please call:	TO E	t i i magani ti
Helliesh Sowey at (251) 947-4329 (Name of Person) (Area Code & Daytime Telephone No.	2 mber)	
MAILING ADDRESS: STREET ADDRESS: Division of Corporations P.O. Box 6327 Division of Corporations Clifton Building		
Tallahassee, FL 32314 Zeffton Building 2661 Executive Center Circle Tallahassee, FL 32301		
Enclosed is a check for the following amount: \$\Begin{align*} \\$125.00 \text{ Filing Fee} \\ \Begin{align*} \\$130.00 \text{ Filing Fee & } \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \	Fee, Certificate us & Certified C	Сору

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:
1 TRIPLE K CONSTRUCTION, LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability
Company," "L.L.C.," "LLC.")
2. State of ALABAMA 3. 40-0068028 (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable)
company is organized)
4. 01/27/2004 5. TERPETUAL
(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")
6
(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)
7. 23505 LAWRENCE MOSEREY ROAD
BARRIEDALE AL ZCECO
(Street Address of Principal Office)
8. If limited liability company is a manager-managed company, check here
9. The name and usual business addresses of the managing members or managers are as follows:
BEVIN D KIRCHHARK
23905 LAWRENCE MOSEREY ROAT
B-3-7-504 = 41 3/5/7
- 1 JODERCI SUNCE JAC DO 20 7
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in
the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.)
11 No. of the control
11. Nature of business or purposes to be conducted or promoted in Florida:
CONSTRUCTION - SITE PREP, LANG CLEARING, DIPT HAULING
m bill
Signature of a member or an authorized representative of a member. (In accordance with section 608.408(3), F.S., the execution of this document constitutes
an affirmation under the period of the facts stated herein are true.)
LEVIN KIRCHHARR
Typed or printed name of signee

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is: TRIPLE K CONSTRUCTION, LLC	
_ /RIPLE I) CONSTITUTION, LIC	
If name unavailable, the alternate name to be used in the state of Fiorida is:	
2. The name and the Florida street address of the registered agent and office are:	
DENJAMIN T. GANFORD	
(Name)	
12667 NOLALE DRIVE	e service E M Marrier T Merget
Florida Street Address (P.O. Box NOT ACCEPTABLE)	j F
PENSACOLA FL 32507	,
PENSACOLA FL 32507	,
	<u>.</u>
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 regist	ered
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 608, Florida Statutes.	
(Signature)	

\$ 100.00 Filing Fee for Application

\$ 25.00 \$ 30.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional) \$ 5.00 Certificate of Status (optional) Beth Chapman Secretary of State P.O. Box 5616 Montgomery, AL 36103-5616

STATE OF ALABAMA

I, Beth Chapman, Secretary of State of the State of Alabama, having custody of the Great and Principal Seal of said State, do hereby certify that

the domestic corporate records on file in this office disclose that Triple K Construction, L.L.C. organized in the office of the Judge of Probate of Baldwin County on January 27, 2004. I further certify that the records do not disclose that said Triple K Construction, L.L.C. has been dissolved.



In Testimony Whereof, I have hereunto set my hand and affixed the Great Seal of the State, at the Capitol, in the City of Montgomery, on this day.

March 6, 2008

Date

Beth Chapman

s ko

Beth Chapman

Secretary of State