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PICK-UP	☐ WAIT	MAIL
		
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Certified Copies	Certificates	s of Status
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COVER LETTER

Registration Section Division of Corporations

TO:

SUBJECT: Compaction Technologies, LLC (Name of Limited Liability Company)			
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida			
Please return all correspondence concerning this matter to the following:			
Bonnie A. Williams (Name of Person)			
Compaction Technologies, ILC (Firm/Company)			
2986 DWI Hole Gap Rd. (Address)			
Rutledge, TN 37861 (City/State and Zip Code)			
For further information concerning this matter, please call:			
Bonnie Williams at (865) 828-10024 (Area Code & Daytime Telephone Number)			
MAILING ADDRESS: STREET ADDRESS: Division of Corporations Division of Corporations			
Division of Corporations P.O. Box 6327 Division of Corporations Clifton Building			
Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301			
Enclosed is a check for the following amount: \$\sum_\$125.00 \text{ Filing Fee} \sum_\$130.00 \text{ Filing Fee & S160.00 \text{ Filing Fee, Certificate}} Certificate of Status Certified Copy of Status & Certified Copy			
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APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:			
1. Compartion Technologies, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "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. Tempessee (Jurisdiction under the law of which foreign limited liability 3. Of Plied for 45-0594812 company is organized)			
4. O3-26-65 (Date of Organization) 5. Per Det ((A)) (Duration: Year fimited liability company will cease to exist or "perpetual")			
6. NA			
(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)			
7. 2986 Owl Hole Gap Rd.			
Rutledge, TN 37861 (Street Address of Principal Office)			
(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:			
Bonnie Williams Gerald Brocklehurst			
2986 Owl Hole Gap Rd. 2986 Owl Hole Gap Rd			
Rutledge, TN 37861 Rutledge, TN 37861			
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. Nature of business or purposes to be conducted or promoted in Florida: Service, Sales,			
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installation, and rental of industrial compactors and			
Donne J. Williams			
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 penalties of perjury that the facts stated herein are true.) Bonnie A. Williams			
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:	
Compaction Technologies, LLC	
If name unavailable, the alternate name to be used in the state of Florida is:	
2. The name and the Florida street address of the registered agent and office are:	
Bonnie A. Williams Proposed Pr	NA NA
1650 Holiday Dr. Florida Street Address (P.O. Box NOT ACCEPTABLE)	PH 3:
Holiday FL 34691	OS OS

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 608, Florida Statutes.

(Borrie J. Williams)
(Signature)

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

Secretary of State
Division of Business Services
312 Eighth Avenue North
6th Floor, William R. Snodgrass Tower
Nashville, Tennessee 37243

. ISSUANCE DATE: 05/02/2008 REQUEST NUMBER: 08123112 TELEPHONE CONTACT: (615) 741-6488

CHARTER/QUALIFICATION DATE: 03/26/2008 STATUS: ACTIVE CORPORATE EXPIRATION DATE: PERPETUAL CONTROL NUMBER: 0573436 JURISDICTION: TENNESSEE

TO: COMPACTION TECHNOLOGIES, LLC AT: BONNIE A WILLIAM 2986 OWL HOLE GAP RUTLEDGE, TN 37861 REQUESTED BY: COMPACTION TECHNOLOGIES, LLC AT: BONNIE A WILLIAM 2986 OWL HOLE GAP RUTLEDGE, TN 37861

CERTIFICATE OF EXISTENCE

I, RILEY C DARNELL, SECRETARY OF STATE OF THE STATE OF TENNESSEE DO HEREBY CERTIFY THAT

A LIMITED LIABILITY COMPANY DULY FORMED UNDER THE LAW OF THIS STATE WITH DATE OF FORMATION AND DURATION AS GIVEN ABOVE; THAT ALL FEES, TAXES, AND PENALTIES OWED TO THIS STATE WHICH AFFECT THE EXISTENCE OF THE LIMITED LIABILITY COMPANY HAVE BEEN PAID: THAT ARTICLES OF DISSOLUTION HAVE NOT BEEN FILED; AND THAT ARTICLES OF TERMINATION OF THE EXISTENCE HAVE NOT BEEN FILED.

FOR: REQUEST FOR CERTIFICATE

COMPACTION TECHNOLOGIES, LLC

2986 OWL HOLE GAP RD

RUTLEDGE, TN 37861-0000

ON DATE: 05/02/08

FEES

RECEIVED:

\$20.00

\$0.00

TOTAL PAYMENT RECEIVED:

\$20.00

RECEIPT NUMBER: 00004393757 ACCOUNT NUMBER: 00598493



RILEY C. DARNELL SECRETARY OF STATE

SS-4458