# Divisor On Corporation 9 OCU 0029 Page 155

### Florida Department of State

Division of Corporations Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H090001734353)))



H090001734353ABC%

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023

Phone : (850)222-1092

: (850)222-1092 : (850)878-5368

\*RE-SUBMIT\*

Please retain original filing date of submission 7/20/20

FLORIDA/FOREIGN LIMITED LIABILITY CO.

Graham Brothers Contractors, LLC

RECEIVED

19 JUL 30 PM 3: 51

SECRETARY OF STATE
ALLAHASSEE, FLORIDA

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$125.00

S. HAWKES

EXAMINER

Electronic Filing Menu

Corporate Filing Menu S. HAWKES

AUG 1 2009

**EXAMINER** 

Help 37707000

https://efile.sunbiz.org/scripts/efilcovr.exe



July 31, 2009

FLORIDA DEPARTMENT OF STATE Division of Corporations

CT CORPORATION SYSTEM

SUBJECT: GRAHAM BROTHERS CONTRACTORS, LLC

REF: W09000034878

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.

Please state the name and address of the Manager or Managers as you stateed in #8 by checking the box.,

If you have any further questions concerning your document, please call (850) 245-6955.

Suzanne Bawkes Regulatory Specialist II

FAX Aud. #: B09000173435 Letter Number: 909A00026278

Registration/Qualification Section

P.O BOX 6327 - Tallahassee, Florida 32314

## APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIS TRANSACT BUSINESS IN FLORIDA IN COMPLIANCE WITH SECTION 608.503. FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER LIMITED LIMBILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: 1. Graham Brothers Contractors, 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 Plorida 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. Georgia (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized) 5. Perpetual (Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual") (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) 1103 Highway 29 South, East Dublin, GA 31027 (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: 10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having oustody 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 cath of the translator must be submitted.) 11. Nature of business or purposes to be conducted or promoted in Florida: Commercial, Heavy, Civil and Site Prep Construction Signature of a member or an authorized representative of a member. (in approximate 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.) Joff Graham

Typed or printed name of signce

# 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 Con	ipany is:
Graham Brothers Contractors, LLC	
If unavailable, the alternate to be used in t	he state of Florida is:
2. The name and the Florida street address	s of the registered agent and office are:
c	T Corporation System
	(Name)
1200	South Pine Island Road
Florida Street Ad	dress (P.O. Box NOT ACCEPTABLE)
Plan	ntation FL 33324 City/State/Zip
liability company at the place designated in t agent and agree to act in this capacity. I furt relating to the proper and complete performe	to accept service of process for the above stated limited this certificate, I hereby accept the appointment as registered ther agree to comply with the provisions of all statutes ance of my duties, and I am familiar with and accept the at as provided for in Chapter 608, Florida Statutes.
By: Lewell &	Ternell Kearney Asst. Secretary
(Signature)	
\$ 100.00 \$ 25.00 \$ 30.00 \$ 5.00	

Control No. 0511084

# STATE OF GEORGIA

## Secretary of State

Corporations Division 315 West Tower #2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530

## CERTIFICATE OF EXISTENCE

I, Karen C Handel, Secretary of State and the Corporations Commissioner of the state of Georgia, hereby certify under the seal of my office that

#### GRAHAM BROTHERS CONTRACTORS, LLC

#### Domestic Limited Liability Company

was formed or was authorized to transact business on 02/09/2005 in Georgia. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.



WITNESS my hand and official seal of the City of Atlanta and the State of Georgia on 28th day of July, 2009

Karen C Handel Secretary of State

Gen CHardel

Continuation Number: 4508307-1 Reference: Venify this certificate online at http://corp.sos.state.ga.us/corp/soskb/venify.asp