M09000004076

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phon	e #)
PICK-UP	MAIT	MAIL
(Bu	siness Entity Na	me)
(Do	cument Number))
	,	
Certified Copies	Certificate	s of Status
	_	
		1
Special Instructions to	Filing Officer:	
		1
V		

Office Use Only



000156008850

10/14/09--01006--020 **130.00

OP OCT IL AMIO: 56
SECRETARY OF STATE

J. BRYAN

OCT 15 2009

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Premier Scaffold Solutions 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:
Lisa Brooks
Name of Person
Premier Scaffold Solutions
Firm/Company 99
6677 Broughton Ave 3000 11 11 11 11 11 11 11 11 11 11 11 11
Address SST F M
Columbus OH 43213 Fig. 3
City/State and Zip Code
E-mail address: (to be used for future annual report notification)
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Lisa Brooks au 614, 882-1549
Name of Person Area Code & Daytime Telephone Number
MAILING ADDRESS:STREET ADDRESS:Division of CorporationsDivision of CorporationsRegistration SectionRegistration SectionP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\sum \\$130.00 Filing Fee & \$\sum \\$155.00 Filing Fee & \$\sum \\$160.00 Filing Fee, Certificate of Status & Certified Copy of Status & Certified Copy

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:
<i>9</i>
1. Premier Scaffold Solutions, 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. (Jurisdiction under the law of which foreign limited liability company is organized) 3. 26-3362163 (FEI number, if applicable)
4. 12-03-08 (Date of Organization) 5. Perpendicular (Duration: Year limited liability company will cease to exist or "perpetual")
6 7-7-707
(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)
7. 6677 Broughton Ave
Columbus OH 43213
(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:
Nichola Valentine 2 6677 Broughton Ave Anthony Valentine 2 Columbus OH 43213
A-11 1-1 3 C-1-1-1-2-13
Mn+hony Valentine / Columbus OH 7,2213
<i>'</i>
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: Sale & Manufuckny
on Hydraulic Scattold
the UK who
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.)
LISA A Brooks
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.

Premier Scaffold Solutions LLC
If unavailable, the alternate to be used in the state of Florida is:
2. The name and the Florida street address of the registered agent and office are: Mark Numan - Manayy (Name)
(Name) 2320 W. Orange Blossom Trail Florida Street Address (P.D. Box NOT ACCEPTABLE)
Apopka FL 32712 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 608, Florida Statutes.

(Signature)

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

United States of America State of Ohio Office of the Secretary of State

I, Jennifer Brunner, do hereby certify that I am the duly elected, qualified and present acting Secretary of State for the State of Ohio, and as such have custody of the records of Ohio and Foreign business entities; that said records show PREMIER SCAFFOLD SOLUTIONS, LLC, an Ohio For Profit Limited Liability Company, Registration Number 1821582, was organized within the State of Ohio on December 02, 2008, is currently in FULL FORCE AND EFFECT upon the records of this office.





Witness my hand and the seal of the Secretary of State at Columbus, Ohio this 1st day of October, A.D. 2009

Ohio Secretary of State

Validation Number: V20092740B2670