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SECRETARY OF STATE PALLAHASSEE, FLORIDA

FILED

#### **COVER LETTER**

	egistration Section vision of Corporations		
SUBJECT	: Legner Engineering, LLC  Name of Limited Liability Company		
The enclose Existence,	ed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Floridand check are submitted to register the above referenced foreign limited liability company to transact but	da," Certi usiness in	ficate of Florida
Please retu	rn all correspondence concerning this matter to the following:		
	Joseph M. Legner	_	
	Name of Person		
	Legner Engineering, LLC		
	Firm/Company	_	
	7050 Sunset Dr S # 101	_ ^>	
	Address	010	
	South Pasadena, FL 33707	2010 FEB - 1	
	City/State and Zip Code	<u> </u>	
	ių⊂ endermonina — formation → f		m
	joelegner@gmail.com	_ =	7
	E-mail address: (to be used for future annual report notification)	PH 4: 31	
For further	information concerning this matter, please call:	Ξ-	
	Joe Legner <sub>at (</sub> 309 <sub>)</sub> 532-3673		
_	Name of Person Area Code & Daytime Telephone Number	_	
Di Ro P.	AlLING ADDRESS: vision of Corporations gistration Section D. Box 6327 Clifton Building Clark Center Circle Tallahassee, FL 32314  STREET ADDRESS: Division of Corporations Registration Section Clifton Building Clifton Building Tallahassee, FL 32301		
Enclosed	is a check for the following amount:		
$\checkmark$	\$125.00 Filing Fee \$\ \text{S130.00 Filing Fee & S155.00 Filing Fee & S160.00 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: Legner Engineering, 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.") Illinois 2. (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized) 4. \_\_\_\_\_ January 29, 2008 Perpetual (Duration: Year limited liability company will cease to (Date of Organization) 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) 7, 7050 Sunset Dr S # 101 South Pasadena, FL 33707 (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: Joseph M. Legner, 7050 Sunset Dr S # 101, South Pasadena, FL 33707 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: Professional consulting engineers --- 01/27/2010 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.) Joseph M. Legner

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:			
Legner Engineering, 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:		•••	
NRAI Services, Inc.	رن ∑	20	
(Name)	ECRI LLAI	2010 FEB	~
2731 Executive Dr Suite 4	CRETAR LAHASS		
Florida Street Address (P.O. Box NOT ACCEPTABLE)	m ~	ξ (1 - 1	7
Moston Fly 2224	$-\frac{1}{C}C_{0}$		j
Weston FLFB3331 City/State/Zip		<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 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)

File Number

0243963-8



#### To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that

LEGNER ENGINEERING, LLC, HAVING ORGANIZED IN THE STATE OF ILLINOIS ON JANUARY 29, 2008, APPEARS TO HAVE COMPLIED WITH ALL PROVISIONS OF THE LIMITED LIABILITY COMPANY ACT OF THIS STATE, AND AS OF THIS DATE IS IN GOOD STANDING AS A DOMESTIC LIMITED LIABILITY COMPANY IN THE STATE OF ILLINOIS.



Authentication #: 1000701586

In Testimony Whereof, I hereto set my hand and cause to be affixed the Great Seal of the State of Illinois, this 7TH day of JANUARY A.D. 2010 .

Desse White

Authenticate at: http://www.cyberdriveillinois.com

SECRETARY OF STATE