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Division of Corporations

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Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (850)222-1092 Fax Number : (850)878-5368

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Foreign Limited Liability Company SES Construction and Fuel Services, LLC

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Certificate of Status	0
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Page Count	05
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Corporate Filing Menu MCLEOD

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EXAMINER

COVER LETTER

	(Name o	of Limited Liability Company)
Florida," C liability co	certificate of Existence, and check meany to transact business in Flor	
Please retu	m all correspondence concerning	this matter to the following:
	Jody Berry	,
		(Name of Person)
	SES Construction and Fuel Services,	шс
		(Firm/Company)
	4815 Bradford DR. NW Suite 201	
,		(Address)
	Hunteville, AL 35805	
		ty/State and Zip Code)
For further i	nformation concerning this matter	r, please call:
Jody .	Berry	at (256) 726-4701
· 	(Name of Person)	(Area Code & Daytime Telephone Number)
	LING ADDRESS: ion of Corporations	STREET ADDRESS: Division of Corporations
P.O. 1	Box 6327 hassec, FL 32314	Clifton Building 2661 Executive Center Circle
		Tallahassee, FL 32301
	•	

TO: Registration Section
Division of Corporations

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:

ing business in Florida and attach a copy of the w he alternate name must include "Limited Liabilit
13
(FEI number, if applicable)
·
: Year limited liability company will cease to perpensal*)
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(fice)
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Florida:
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SECRETARY OF STATE OIVISION OF CORPORATIONS

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.

SES Construction and Puel Services, LLC					
if ne	ne una	available, th	e alternate name t	o be used in the state	e of Florida is:
		· · · · · · · ·			
2. TI	e nam	e and the F	lorida street addre	ss of the registered a	gent and office are:
		•	į. (C T Corporation System	
				(Namo)	
		•	. 120	00 South Pine Island Ros	ad.
Florida Street Address (P.O. Box NOT ACCEPTABLE)					
		-	Plantation	e PRY	33324
		· · · · · · · · · · · · · · · · · · ·	,	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.

C T Corporation System

(Signature)
Danny Verdecchia, Jr. Asst. Secretary

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

Alaska Entity # 93886

State of Alaska Department of Commerce, Community, and Economic Development

CERTIFICATE OF GOOD STANDING

THE UNDERSIGNED, as Commissioner of Commerce, Community, and Economic Development of the State of Alaska, and custodian of corporation records for said state, hereby certifies that

SES CONSTRUCTION AND FUEL SERVICES LLC

on the 11th day of May, 2005 filed in this office its Articles of Organization for a Limited Liability Company organized under the laws of this state.

I FURTHER CERTIFY that said Limited Liability Company is in good standing, having fully complied with all the requirements of this office.

No information is available in this office on the financial condition, business activity or practices of this corporation.



IN TESTIMONY WHEREOF, I execute this certificate and affix the Great Seal of the State of Alaska on the 10th day of March, 2010.

Emil notte

Emil Notti Commissioner

Certification Number: 400932-1

Verify this certificate online at https://myalaska.state.ak.us/businesa/soskb/verify.asp