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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. CLINE
APR 19 2010
EXAMINER



FLORIDA DEPARTMENT OF STATE Division of Corporations

April 8, 2010

BRIAN LUMBATIS COMPLETE SIGNS LLC P.O. BOX 8861 DOTHAN, AL 36304

SUBJECT: COMPLETE SIGNS OF DOTHAN, LLC.

Ref. Number: W10000017309

We have received your document for COMPLETE SIGNS OF DOTHAN, LLC. and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please (850) 245-6047.

Carolyn Lewis
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 510A00008643

COVER LETTER

Division of Corporations
SUBJECT: Complete Signs. L.L.C. Name of Limited Liability Company
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Rusiness in Florida " Certificate of
Please return all correspondence concerning this matter to the following:
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: Name of Person
Name of Person
Complete Signs L.L.C Firm/Company
• •
Address
Dothan, Al. 36304 or 36303 ESS 3. City/State and Zip Code
City/State and Zip Code
B-mail address: (to be used for future annual report notification)
지수 : : : : : : : : : : : : : : : : : : :
Brian Lumbatis at (334) 797-7247. Name of Person Area Code & Daytime Telephone Number
, i
Division of Corporations Division of Corporations
Registration Section Registration Section P.O. Box 6327 Clifton Building
Tallahassee, FL 32314 2661 Executive Center Circle
Tallahassee, FL 32301
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$130.00 Filing Fee & \$155.00 Filing Fee & \$160.00 Filing Fee, Certificate Certificate of Status Certified Copy

WRITTEN CONSENT TO ADOPT ALTERNATE NAME FOR USE IN THE STATE OF FLORIDA

We, the undersigned, do hereby certify that we are the Managers and/or Managing
Members of Complete Signs LLC (Name of Limited Liability Company)
a limited liability company duly organized and existing under the laws of
(State or Country of Organization)
Because the name of this foreign limited liability company does not satisfy the
requirements of the s. 608.406, F.S., the limited liability company hereby adopts the
following name to transact business in the state of Florida:
Complete Signs of Duthan LLC. (Name to be used by limited liability company in Florida. NOTE: Name must end with Limited Liability Company, L.L.C., or LLC.)
Date: $\frac{4-6-10}{2}$
Signature(s) of Manager(s) and/or Managing Member(s): Brian Lumbats
West dumbato

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:

1	Complete Signs 1.1.C. (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.,"		
(16	Complete Signs of Dothan L.L.C. me unavailable, enter alternate name adopted for the purpose of transacting business in Florida and att		
(11 nai	me unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attent of the managers or managing members adopting the alternate name. The alternate name must include the managers or managing members adopting the alternate name.	acn a copy le "Limited	of the written Liability
	pany," "L.L.C," "LLC.")		. * *
2.	Alabama / Houston Cu. 3		
(Jui	Alabama / Houston Co. risdiction under the law of which foreign limited liability inpany is organized) (FEI number, if applicable in the law of which foreign limited liability in the law of which law of which foreign limited liability in the law of which liability is a second liability in the law of which liability is a second liability in the law of which liability is a second liability in the law of which liability is a second liability in the law of which liability is a second liability in the law of which liability is a second liability in the law of which liability is a second liability in the law of which liability is a second liability in the law of which liability is a second liability in the law of which liability is a second liability in the law of which liability is a second liability in the law of which liability is a second liability in the law of which liability is a second liability in the law of which liability is a second liability in the law of which liability is a second liability in the law of which liability is a second liability in the law of which liability is a second lia	le)	
4	11-5-03 (Date of Organization) 5. Per petual (Duration: Year limited liability compa		
	(Date of Organization) (Duration: Year limited liability comparation exist or "perpetual")	any will cea	se to
6			
	(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)	产品	>
_		至图 3	第四
7	227 Host dale Dr.	-	
	Oothan, Al. 36303 (Street Address of Principal Office)	HO HO	m [©]
	(Street Address of Principal Office)	可の	2 0
δ it	limited liability asymptotics a manager managed asymptotic sheet have	SSEE, FLORIDA	<u></u>
0. 11	limited liability company is a manager-managed company, check here	9m	-
9. TI	he name and usual business addresses of the managing members or managers are as f	ollows:	
	$\Omega_{ab} = \lambda_{ab} + \lambda_{ab}$		
_	Brian Lumbatis		
	P.O. Box 8861		
<u> </u>	Dotlan, Al. 36304		
10. A	ttached is an original certificate of existence, no more than 90 days old, duly authenticated by the official hav	ving custody	of records in
	isdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a for	eign langua	ge, a
transla	ation of the certificate under oath of the translator must be submitted.)		
11. N	Nature of business or purposes to be conducted or promoted in Florida:	Repair	+ Sales.
	Brian Lumbut	-	 -
	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.)		
	Wrian Lumbatis. Typed or printed name of signee		
	rypes or printed name or argues		

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:			
Complete Signs LL.C.			_
If unavailable, the alternate to be used in the state of Florida is: Complete Signs of Dothan LLC. 2. The name and the Florida street address of the registered agent and office are:			_
Richard Dobbins. (Name) 3900 McClellan Rd. Florida Street Address (P.O. Box NOT ACCEPTABLE) Pen Sacda FL 32503 City/State/Zip	SECRETARY OF STATE TALLAHASSEE, FLORIDA	10 APR 19 PH 12: 47	FILED

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.

Richard Dollins
(Signature)

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

Beth Chapman Secretary of State

P.O. Box 5616 Montgomery, AL 36103-5616

STATE OF ALABAMA

I, Beth Chapman, Secretary of State of the State of Alabama, having custody of the Great and Principal Scal of said State, do hereby certify that

the domestic corporate records on file in this office disclose that Complete Signs, LLC organized in the office of the Judge of Probate of Houston County on February 4, 2003. I further certify that the records do not disclose that said Complete Signs, LLC has been dissolved.



In Testimony Whereof, I have hereunto set my hand and affixed the Great Scal of the State, at the Capitol, in the City of Montgomery, on this day.

April 12, 2010

Date

Beth Chapman

Beth Chapman

Secretary of State