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PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nar	me)
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Certified Copies	_ Certificates	s of Status
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D. BRUCE

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EXAMINER

#### **COVER LETTER**

TO:

TO:	egistration Section ivision of Corporations	
SUBJE	: BLUE OAK CONSTRUCTION, LLC  Name of Limited Liability Company	
	ed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Cer and check are submitted to register the above referenced foreign limited liability company to transact business	
Please i	rn all correspondence concerning this matter to the following:	
	BRIAN HAAG	
	Name of Person	
	BLUE OAK CONSTRUCTION, LLC	
	Firm/Company	
	114 DEL PRADO BLVD, S	
	Address	
	;	
	CAPE CORAL, FL 33990	
	City/State and Zip Code	***************************************
	bh4610@gmail.com	
	E-mail address: (to be used for future annual report notification)	£
For furt	information concerning this matter, please call:	
	BRIAN HAAG at ( 239 ) 229-1199	
	Name of Person Area Code & Daytime Telephone Number	
	AILING ADDRESS:  ivision of Corporations  gistration Section  O. Box 6327  Allahassee, FL 32314  STREET ADDRESS:  Division of Corporations  Registration Section  Clifton Building  2661 Executive Center Circle  Tallahassee, FL 32301	
Enclos	is a check for the following amount:  \$125.00 Filing Fee \$\sum \text{\$130.00 Filing Fee & }\sum \text{\$155.00 Filing Fee & }\sum \text{\$160.00 Filing Fee, Certified Copy} \text{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: BLUE OAK CONSTRUCTION, 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.") STATE OF MISSISSIPPI (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized) 10/19/07 Perpetual (Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual") 8/1/2010 (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) 7. 114 DEL PRADO BLVD, S CAPE CORAL, FL 33990 (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: **BRIAN HAAG** 114 DEL PRADO BLVD, S CAPE CORAL, FL 33990 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.)

IN CAPE CORAL, FL FOR CONSTRUCTION IN MISSISSIPPI

11. Nature of business or purposes to be conducted or promoted in Florida:

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.)

CLERICAL OFFICE

BRIAN HAAG, MANAGING MEMBER

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:
BLUE OAK CONSTRUCTION, 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:
BRIAN HAAG
(Name)
114 DEL PRADO BLVD, S
Florida Street Address (P.O. Box NOT ACCEPTABLE)
CAPE CORAL FL 33990
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)

## State of Mississippi

#### Office of the Secretary of State C. Delbert Hosemann, Jr., Secretary of State Jackson, Mississippi

#### **CERTIFICATE**

I, C. DELBERT HOSEMANN, JR., Secretary of State of the State of Mississippi, and as such the legal custodian of the records as required by The Mississippi Limited Liability Company Act to be filed in my office do hereby certify that:

BLUE OAK CONSTRUCTION LLC

Formed October 19, 2007

A Mississippi Limited Liability Company has filed the necessary documents in this office and has obtained a certificate of formation under the provisions of The Mississippi Limited Liability Company Act as shown by the records in this office.

That the registered office of said Limited Liability Company is located at:

129 HIGHWAY 90, WAVELAND, MS 39576 PO BOX 2068 BAY SAINT LOUIS MS 39521

and that the registered agent at that address is:

STRIBLING, K. LEE

I further certify that said Limited Liability Company has paid the fees for filing the above papers required by law as shown by the records of this office and that said Limited Liability Company is in good standing to do business in Mississippi at this time.

Given under my hand and seal of office August 2, 2010

C. Delbert Hosemann, Jr. Secretary of State

Certification Number: 12254298-1 Page 1 of 1 Reference: Verify this certificate online at https://business.sos.state.ms.us/corp/soskb/verify.asp