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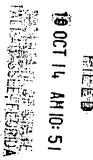
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**S. HAWKES**0CT 1 5 2010 **EXAMINER** 

### CONART PRECAST LLC

#### **COVER LETTER**

OCT 07 2010

\$160.00 Filing Fee, Certificate

of Status & Certified Copy

TO: Registration Section Division of Corporations RECEIVED SUBJECT: ConArt Precast, 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: W. Jack Welborn, III Name of Person ConArt Precast, LLC. Firm/Company 3782 US-280 E, P.O. 335 Address Cobb, Georgia 31735 City/State and Zip Code jwelborn@conartprecast.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: W. Jack Welborn, III Area Code & Daytime Telephone Number Name of Person **MAILING ADDRESS: STREET ADDRESS: Division of Corporations** Division of Corporations Registration Section Registration Section P.O. Box 6327 Clifton Building 2661 Executive Center Circle Tallahassee, FL 32314 Tallahassee, FL 32301

\$155.00 Filing Fee &

Certified Copy

Enclosed is a check for the following amount:

\$125.00 Filing Fee

\$130.00 Filing Fee &

Certificate of Status

## 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. ConArt Precast, LLC.	
	lude "Limited Liability Company," "L.L.C.," or "LLC.")
Name is available according to search	
(If name unavailable, enter alternate name adopted for the purp consent of the managers or managing members adopting the al Company," "L.L.C," "LLC.")	pose of transacting business in Florida and attach a copy of the writte ternate name. The alternate name must include "Limited Liability
2. State of Georgia	3.
(Jurisdiction under the law of which foreign limited liability company is organized)	(FEI number, if applicable)
4. 12/23/2008	5. Indefinite
(Date of Organization)	(Duration: Year limited liability company will cease to exist or "perpetual")
	3/2008
(Date first transacted business in I (See sections 608.501 & 608.502 F.	S. to determine penalty liability)
7. 3782 US-280 E, P.O. 335	
Cobb, Georgia 31735	
(Street Address	ss of Principal Office)
8. If limited liability company is a manager-manage	ed company, check here
9. The name and usual business addresses of the ma	anaging members or managers are as follows:
Jack Welborn	
3782 US-280 E, P.O. 335	
Cobb, Georgia 31735	
10. Attached is an original certificate of existence, no more than 9 the jurisdiction under the law of which it is organized. (A photoco translation of the certificate under oath of the translator must be su	
11. Nature of business or purposes to be conducted	or promoted in Florida: Precast
W well-	authorized representative of a member.
Signature of a member or an	authorized representative of a member.
(In accordance with section 608.408(3), F.S., the ex	ecution of this document constitutes an affirmation under the
penalties of perjury that the facts stated herein are	true. I am aware that any false information submitted in a

Typed or printed name of signee

W. Jack Welborn, III

document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

## 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:	
ConArt Precast, LLC.	
If unavailable, the alternate to be used in the state of Florida is:	
N/A	000
2. The name and the Florida street address of the registered agent and office are:	712 3
Corporation Service Company	
(Name)	5
1201 Hays Street	
Florida Street Address (P.O. Box NOT ACCEPTABLE)	
Tallahassee FL 32301 City/State/Zip	<del></del>

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.

Jerome L. Suarez, Assistant Secretary

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

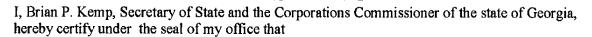
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## STATE OF GEORGIA

### Secretary of State

Corporations Division 315 West Tower #2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530

# CERTIFICATE OF EXISTENCE



#### **CONART PRECAST, LLC**

#### **Domestic Limited Liability Company**

was formed or was authorized to transact business on 12/23/2008 in Georgia. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.



WITNESS my hand and official seal of the City of Atlanta and the State of Georgia on 6th day of October, 2010

B: P.h-

Brian P. Kemp Secretary of State

Certification Number: 6181047-1 Reference: 11906.001

Verify this certificate online at http://corp.sos.state.ga.us/corp/soskb/verify.asp