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To:

Division of Corporations

Fax Number

: (850)617~6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone

: (850)222-1092

Fax Number

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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Foreign Limited Liability Company GORMAN GENERAL CONTRACTORS, LLC

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T. CLINE

MAY - 3 2011

EXAMINER

COVER LETTER

TOi	Registration Section Division of Corporations			
SUBJI	ECT: Gorman General Contractor	s, LLC		
		Name of Limited Linbility Company		
The en Existen	closed "Application by Foreign Lives, and check are submitted to regi	nited Liability Company for Authorization to Transact Business in Florida," ister the above referenced foreign limited liability company to transact busin	Certificate of 1055 in Florida.	
Please	return all correspondence concerni	ng this matter to the following:		
	Joyce Wuchich			
		Numa of Person		
	Corinna & Company, Inc			
• •	, <u> </u>	Pirm/Company		
•	200 N. Main'St.		7	
		Address	SEC SEC	
	Oregon, WI 53575	•	RETA AHA	***
	<u></u>	City/State and Zip Code	HASSE	-
]woetnert@gormanuss.co	m	147	
	E-mail a	ddress; (to be used for future annual report notification)	F S	C
For furti	ist information concerning this win	fler, please cult:	Y & 31 STATE LORIDA	*
	Megan Sohuetz	at (608) 835-3210	> =	
•	Name of Person	Aren Code & Daytime Telephone Number		
	MAILING ADDRESS: Division of Corporations Registration Soction	STREET ADDRESS: Division of Corporations Registration Section		
	P.O. Box 6327 Trillahassec, FL 32314	Cilfton Building 2661 Executive Center Circle Tuliahussec, FL 32301		
	ed is a check for the following \$125.00 Filing Pee S130.00 I Certificat		ı	

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION GOLSOS, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A PORTION LIMITED LIABILITY COMPANY TO TRANSACT BLEINESS IN THE STATE OF FLORIDA:

(Name of Foreign Limited Liability Company; must in	oluda "Limited Linbility Conipany," "L.L.C.," or "LLC.	(")
name unavailable, enter alternate name adopted for the purisent of the manugers or managing members adopting the ampany," "L.L.C." "L.C."	pose of transacting business in Florida and attach a copy ilternate name. The alternate name must include "Limited	of the writed Lindbility
Wisconsin	3. 27-1239625	
huisdiction under the law of which foreign limited liability company is organized)	(FEI flumber, if applicable)	
10/29/09	5 Perpetual	
(Date of Organization)	(Duration: Year limited liability company will care exist or "perpetual")	asc to
(Date first transacted business in F	Jorida If prior to registration)	
(See sections 608.501 & 608.502 F.	S. to determine penalty liability)	F.S
200 N. Main St,		<u></u> E
Oregon, W1 53575		RET
(Street Addres	se of Principal Office)	S S
f limited liability company is a manager-manage	d company, check here 🔀	Y OF
The name and usual business addresses of the mai	naging members or managers are as follows:	STATE LORID,
Gorman & Company, Inc.		<u>SE</u>
· ·	,	
		,
		
Attached is an original certificate of existence, no more than 90 visidiction under the law of which it is organized. (A photocopation of the certificate under oath of the translator must be sub. Nature of business or purposes to the conducted o	py is not acceptable. If the certificate is in a foreign language imitted.) or promoted in Florida: Construction General Control	BC, H
by: Gorman Hampany, lat. (nanace	······································
	uthorized representative of a member.	4.5
(In accordance with section 608.41814) F.S., the exer	eution of this document constitutes an affirmation under the	
and a state of the Property of the little for all and the self the little of the self of t	ma i smi atvace marshiy talco information. Silbinifed in 6	
ringument to the Department of State constitute	es a third degree follows as provided for in \$.817.155, P.S	3

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.

If unavailable, the alternate to be used		
		·····
. The name and the Florida street add	dress of the registered agent and office are:	
744 A. A. A. A.		2011 RAY SECRETA TALLAHA
C. T Corporation System		
(Name)		#E **
1200 South Plue Island Ro		-2 SSE
Florida Stre	et Address (P.O. Box NOT ACCEPTABLE)	M & 3.1 OF STATE E. FLORIDA
	•	ညီဟု 🛥
Plantation	FL. 33324	TATE ORID.

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 duttes, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, Florida Statutes.

By: C 1 Corporation System

Author Prices

(Signature)

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

United States of America State of Wisconsin

DEPARTMENT OF FINANCIAL INSTITUTIONS

Division of Corporate & Consumer Services



To All to Whom These Presents Shall Come, Greeting:

1, RAY ALLEN, Deputy Secretary, Department of Financial Institutions, do hereby certify that

GORMAN GENERAL CONTRACTORS, LLC

is a domestic corporation or a domestic limited liability company organized under the laws of this state and that its date of incorporation or organization is October 29, 2009.

I further certify that said corporation or limited liability company has, within its most recently completed reports year, filed an annual report required under ss. 180.1622, 180.1921, 181.1622 or 183.0120 Wis. Stats., and that I has not filed articles of dissolution.



IN TESTIMONY WHEREOF, I have bereunto set . my hand and affixed the official seal of the Department on April 27, 2011.

RAY ALLEN, Deputy Secretary Department of Financial Institutions

Effective July 1, 1996, the Department of Financial Institutions assumed the functions previously performed by the Corporations Division of the Secretary of State and is the successor custodian of corporate records formerly held by the Secretary of State.

DFI/Corp/33

To validate the authenticity of this certificate

Visit this web address: http://www.wdfi.org/appa/ccs/verify/

Enter this code:

91153-C36860D0