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EXAMINER

COVER LETTER

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	ation Section n of Corporations			
SUBJECT:		4 Associates, PLLC ne of Limited Liability Company		
		ility Company for Authorization to Transact Business in bove referenced foreign limited liability company to trans		
Please return all	correspondence concerning this ma	tter to the following:		
	Louis A. Hackney	!		
		Name of Person		,
	Moore Hackney &	Associates, PLLC		
		Firm/Company	_	
	1600 campen Ro	a d	$\Xi_{i'}$	2
		Address	- E	É -1.
	charlotte, NC	28203	AHASSE	CO ATTEN
		City/State and Zip Code	671	70 111
	lhackney e mo	ove hadeney, com	STATE A	رن دن
		o be used for future annual report notification)	Eri A	C) C
For further infor	mation concerning this matter, pleas	se call:		
	Louis A. Hackney	at (980) 613 - 8512	0	r-
	Name of Person	Area Code & Daytime Telephone Number	(704	743-5369
Divisio Registr P.O. Bo	ING ADDRESS: n of Corporations ation Section ox 6327 ssee, FL 32314	STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		
	check for the following amou Filing Fee \$\int_{\text{Certificate of Stat}}^{\text{\$130.00 Filing Fe}}\$	e & \$\infty\$\$155.00 Filing Fee & \$\infty\$\$\$160.00 Filing Fee,	Certifica ed Copy	te

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: Moore Hackney & Associates, PLLC
(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.") 2. North Carolina 3. 45-4668607

(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) March 12, 2012 PERPETULL (Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual") (Date first transacted business in Florida, if prior to registration.) (See sections 608,501 & 608,502 F.S. to determine penalty liability) 1600 Camden Road charlotte, (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 Charlotte, Ne 28203 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.) 11. Nature of business or purposes to be conducted or promoted in Florida: Engineering Consulting

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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

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:			
Moore Hackney & Associates, PLLC			_
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:	FALLAHASSEI	12 JUL 23	#1 #2 #1 #2 #1
In corp Services, Inc.	ASS.	<u>\</u> 3	Marchine Mar
(Name)		_r ₂	F1-1-1
17888 67th court North	FLORIDA	1 23	Andrea .
Florida Street Address (P.O. Box NOT ACCEPTABLE)		9	
Loxahatchee, FL 33470			
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)



NORTH CAROLINA Department of the Secretary of State

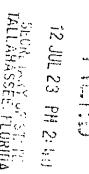
CERTIFICATE OF EXISTENCE (PROFESSIONAL LIMITED LIABILITY COMPANY)

I, Elaine F. Marshall, Secretary of State of the State of North Carolina, do hereby certify that

MOORE HACKNEY & ASSOCIATES, PLLC

is a professional limited liability company duly formed under the laws of the State of North Carolina, having been formed on the 12th day of March, 2012, with a period of duration ending Perpetual.

I FURTHER certify that the said professional limited liability company's articles of formation are not suspended for failure to comply with the Revenue Act of the State of North Carolina; that the said professional limited liability company is not suspended for failure to comply with the provisions of any North Carolina Licensing Board; and that the said professional limited liability company has not filed articles of dissolution as of the date of this certificate.







IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 19th day of July, 2012.

Elaine J. Marshall

Secretary of State