# M1200005819

(Re	equestor's Name)			
· (Ac	idress)			
- (Ac	ldress)	· · · · · ·		
(Cit	ty/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Bu	ısiness Entity Nan	ne)		
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				
		Į.		

Office Use Only

B. KOHR

OCT 18 2012

EXAMMER



500238780155

08/28/12--01013--017 \*\*125.00





#### FLORIDA DEPARTMENT OF STATE Division of Corporations

August 29, 2012

LEE OWENS PO BOX 87 GREENVILLE, SC 29602

SUBJECT: NATIONS ROOF, LLC Ref. Number: W12000044880



We have received your document for NATIONS ROOF, LLC and your check(s) totaling \$125.00. However, the document has not been filed and is being retained in this office for the following:

The name designated in your document is unavailable because it is the same as or not distinguishable from an existing entity. If the principals are the same in both entities, please send a letter or affidavit advising us of this association, along with your articles so that we may complete the filing process.

Please return 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 call (850) 245-6051.

Neysa Culligan Regulatory Specialist II

Letter Number: 612A00022077

#### COVER LETTER

TO:

TO:	Registration Secti Division of Corpo			
SUBJI	ECT: Nations	Roof, LLC		P
		Na	me of Limited Liability Comp	any
The en	nclosed "Application nce, and check are s	by Foreign Limited Liab ubmitted to register the a	oility Company for Authorizat bove referenced foreign limite	ion to Transact Business in Florida, Cod liability company to transact busines
Please	return all correspon	dence concerning this ma	atter to the following:	
	Lee O	wens .		
	• .		. Name of Person	
	Smith I	Moore Leatherwoo		
	• .		Firm/Company	
	РО Во	x 87		
			Address	
	Green	ville, SC 29602		
			City/State and Zip Code	
	lee.ow	ens@smithmoo E-mail address: (	orelaw.com to be used for future annual re	port notification)
For fur	rther information cor	ncerning this matter, plea	se call:	
	Lee Owens		at ( 864 ) Area Code & Daytime T	240-2499
		Name of Person	Area Code & Daytime T	elephone Number
	MAILING ADD Division of Corpo Registration Secti P.O. Box 6327 Tallahassee, FL 33	orations on	STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circ Tallahassee, FL 32301	ile
Enclo	sed is a check for \$125.00 Filing Fe	r the following amou  State of State  Certificate of State	ee & \$\Bigcap\$155.00 Filing Fee a	& \$160.00 Filing Fee, Certificate 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:

1. Nations Roof, 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 woonsent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C," "LLC.")
2. Delaware (Jurisdiction under the law of which foreign limited liability company is organized)  3. 75-3161782 (FEI number, if applicable)
4. Aug 10, 2012  (Date of Organization)  5. perpetual  (Duration: Year limited liability company will cease to exist or "perpetual")
6. simultaneously herewith  (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)  7. 1633 Blairs Bridge Road
7. 1633 Blairs Bridge Road
Lithia Springs, GA 30122  (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:
Richard M. Nugent, 509 W. Bay Street, Tampa, FL 33606
James Nugent, 1633 Blairs Bridge Road, Lithia Springs, GA 30122
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of record 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: roofing services
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

James Nugent

# 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 Co	ompany is:	
Nations Roof, LLC		·
If unavailable, the alternate to be used in	the state of Florida is:	
2. The name and the Florida street addre	ess of the registered agent and office ar	re: .
Nations Roof of Florid	da, LLC	
	(Name)	
3311 Bartlett Blvd.		
Florida Street A	Address (P.O. Box <u>NOT</u> ACCEPTABLE)	
Orlando	<sub>FL</sub> 32811	
	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)

# Delaware

PAGE 3

### The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "NATIONS ROOF, LLC" IS DULY FORMED

UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING

AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE

SHOW, AS OF THE TWENTY-SECOND DAY OF AUGUST, A.D. 2012.

5197060 8300

120926527

AUTHENTY CATION: 9796953

DATE: 08-22-12

You may verify this certificate online at corp.delaware.gov/authver.shtml