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Florida Department of State  
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Account Number : FCA000000023  
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Foreign Limited Liability Company  
Specpro Professional Services LLC

Certificate of Status	0
Certified Copy	0
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# COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** SpecPro Professional Services 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:

Candice King

Name of Person

SpecPro Professional Services LLC

Firm/Company

7067 Old Madison Pike Suite 170

Address

Huntsville, AL 35806

City/State and Zip Code

candice.king@bva-llc.com

E-mail address (to be used for future annual report notification)

For further information concerning this matter, please call:

Candice King

Name of Contact Person

at ( 256 )

Area Code

726-4715

Daytime Telephone Number

## MAILING ADDRESS:

Division of Corporations  
Registration Section  
P.O. Box 6327  
Tallahassee, FL 32314

## STREET ADDRESS:

Division of Corporations  
Registration Section  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

Enclosed is a check for the following amount:

- ☐ \$125.00 Filing Fee    ☐ \$130.00 Filing Fee & Certificate of Status    ☐ \$155.00 Filing Fee & Certified Copy    ☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy

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

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A  
FOREIGN LIMITED LIABILITY COMPANY TO TRANSACTION BUSINESS IN THE STATE OF FLORIDA:

1. SpecPro Professional Services 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. The alternate name must include "Limited Liability Company," "L.L.C.," or "LLC.")

2. Alaska 3. 46-4052029  
(Jurisdiction under the law of which foreign limited liability company is organized) (PIB number, if applicable)

4. 01/01/2014  
(Date first transacted business in Florida, if prior to registration.)  
(See sections 605.0904 & 605.0905, F.S. in connection penalty liability)

5. 7067 Old Madison Pike Suite 170 Huntsville, AL 35806

(Street Address of Principal Office)

6. 7067 Old Madison Pike Suite 170 Huntsville, AL 35806

(Mailing Address)

7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

Stephen Alexander General Manager 1015 Ariel Way Melbourne, FL 32940

8. 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)

  
Signature of an authorized person

(In accordance with section 605.0203, 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.817.153, F.S.)

Stephen Alexander  
Typed or printed name of signer

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), 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:

SpecPro Professional Services 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:

CT Corporation System

(Name)

1200 South Pine Island Road

Florida Street Address (P.O. Box NOT ACCEPTABLE)

Plantation

FL 33324

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 605, Florida Statutes.*

By: CT Corporation System

(Signature)

Nathan S. Giffin Asst. Secretary

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

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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Alaska Entity #10016371

**State of Alaska**  
**Department of Commerce, Community and Economic Development**  
**Corporations, Business and Professional Licensing**

**Certificate of Compliance**

The undersigned, as Commissioner of Commerce, Community and Economic Development of the State of Alaska, and custodian of corporation records for said state, hereby issues a Certificate of Compliance for:

**SpecPro Professional Services, LLC**

This entity was formed on November 06, 2013 and is in good standing. This entity has filed all biennial reports and fees due at this time.

No information is available in this office on the financial condition, business activity or practices of this corporation.



IN TESTIMONY WHEREOF, I execute the certificate and affix the Great Seal of the State of Alaska effective February 03, 2014.

A handwritten signature in cursive script, reading "Susan K. Bell".

Susan K. Bell  
Commissioner

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