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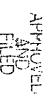
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EXAMINER
DEC -1 2014

COVER LETTER

TO:

Registration Section

Division of Corporations
SUBJECT: Tab Driggers Construction 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:
Tab Driggers Name of Person
Tab Driggers Construction LLC Firm/Company
16047 Hwy 134 Address
New Brockton ALAbAmA 36351 City/State and Zip Code
tabdricgers @ Yahoo. Com E-mathddress: (to be used for future annual report notification)
For further information concerning this matter, please call:
Tah Driscers at (334) 447-0039 Name of Contact Person Area Code 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: \$\Bigcup \\$125.00 \text{ Filing Fee} \Bigcup \\$130.00 \text{ Filing Fee & Certificate of Status} \Bigcup \\$155.00 \text{ Filing Fee & Certified Copy} \Bigcup \\$160.00 \text{ Filing Fee, Certified Copy} \text{of Status & Certified Copy}

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

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:
1. Tab Drisgers Construction LLC (Name of Foreign Subited 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. <u>MIABAMA</u> (Jurisdiction under the law of which foreign limited liability company is organized) 3. <u>427-931</u> (FEI number, if applicable)
4. (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)
16047 Hwy 134 New Brackson Al. 3635/ 5
6.
(Mailing Address)
7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: Pres. 7Ab F. Driogers 16047 Hwy 134 New Bracker, Al. 36351 Christoper E. Williams Vis Pres. 5223 Shore Rd. Farmara wty Pl.
32404
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)
Tob Digges
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.817.155, F.S.)
Tab Drisgers Typed or printed name of signee
r ypou or premied name or signed

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.

· Y

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.

(Stenature)

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

Jim Bennett Secretary of State P.O. Box 5616 Montgomery, AL 36103-5616

STATE OF ALABAMA

I, Jim Bennett, Secretary of State of Alabama, having custody of the Great and Principal Seal of said State, do hereby certify that

the entity records on file in this office disclose that Tab Driggers Construction LLC was formed in Coffee County, Alabama on December 9, 2008. The Alabama Entity Identification number for this entity is 427-931. I further certify that the records do not disclose that said entity has been dissolved, cancelled or terminated.



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In Testimony Whereof, I have hereunto set my hand and affixed the Great Seal of the State, at the Capitol, in the city of Montgomery, on this day.

12/1/2014

Date

di sun

Jim Bennett

Secretary of State