

MIS0000007102

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

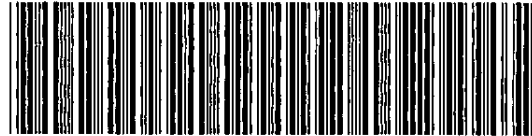
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600276489836

09/04/15--01016--006 **160.00

RECEIVED
15 SEP -4 PM 4:49
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SEP 08 2015

Y SULKER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: R. ANDERSON Roofing, 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:

ROBBIE LEE ANDERSON
Name of Person

R ANDERSON Roofing, LLC
Firm/Company

P.O. BOX 354
Address

TICKFAW, LA 70466
City/State and Zip Code

rob@crasm.net
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ROBBIE LEE ANDERSON at (985) 542-0900
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:

- ☐ \$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 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. R. ANDERSON Roofing, 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. LOUISIANA 3. 46-2654772
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable)
company is organized)

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

5. 49181 Hwy 51N
TICKFAW, LA 70466
(Street Address of Principal Office)

6. P.O. BOX 354
TICKFAW, LA 70466
(Mailing Address)

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: LYNCHARD & GREENE, P.L.

Office Address: 1901 ANDORCA STREET

NAVARRE, Florida 32566
(City) (Zip code)

Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in
this application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept
the obligations of my position as registered agent.

[Signature]
(Registered agent's signature)

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

ROBBIE LEE ANDERSON, OWNER
PO BOX 354
TICKFAW, LA 70466

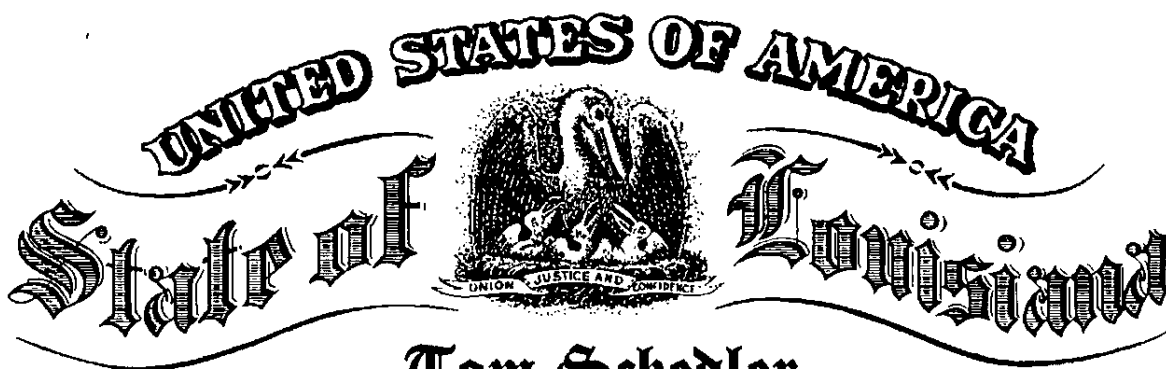
9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the
jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath
of the translator must be submitted)

[Signature]
Signature of an authorized person

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. 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.

ROBBIE LEE ANDERSON
Typed or printed name of signee

15 SEP -4 PM 4:19
RECEIVED
CLERK OF
COURT
JULIA HARRIS, CLERK



Tom Schedler

SECRETARY OF STATE

As Secretary of State of the State of Louisiana I do hereby Certify that

the Articles of Organization of

R.ANDERSON ROOFING LLC

Domiciled at TICKFAW, LOUISIANA,

Were filed in this Office and a Certificate of Organization was issued on March 01, 2013,

I further certify that no Certificate of Dissolution has been issued.

In testimony whereof, I have hereunto set my hand and caused the Seal of my Office to be affixed at the City of Baton Rouge on,

August 21, 2015

Secretary of State

Web 41099831K



Certificate ID: 10629459#G6Q83

To validate this certificate, visit the following web site, go to **Business Services**, **Search for Louisiana Business Filings**, **Validate a Certificate**, then follow the instructions displayed.
www.sos.la.gov