# M1600000 2042

(Req	uestor's Name)	
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(City	/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
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(Doc	ument Number)	
Certified Copies	Certificates	of Status
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SECRETARY OF STATE
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WAR I LYARRIE

**CAPITAL CONNECTION, INC.**417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Covington Civil & Environmental LLC	
	Art of Inc. File
	LTD Partnership File
	Foreign Corp. File
	L.C. File
	Fictitious Name File
	Trade/Service Mark
	Merger File
	Art. of Amend. File
	RA Resignation
	Dissolution / Withdrawal
	Annual Report / Reinstatement
	Cert. Copy
	Photo Copy
	Certificate of Good Standing
	Certificate of Status
	Certificate of Fictitious Name
	Corp Record Search
	Officer Search
	Fictitious Search
Signature	Fictitious Owner Search
	Vehicle Search
	Driving Record
Requested by: SETH 03/10/16	UCC 1 or 3 File
Name Date Time	UCC 11 Search
	UCC 11 Retrieval
Walk-In Will Pick Up	Courier

#### **COVER LETTER**

TO:	Registration Section Division of Corporations			
SUBJE	COVINGTON CIVIL & ENVIRONMENTAL	LLC		
	Name of	f Limited Liability Company	,	
The end Existen	closed "Application by Foreign Limited Liability Con ce, and check are submitted to register the above refe	npany for Authorization to T renced foreign limited liabil	ransact Business in Florida," Certificate of ity company to transact business in Florida	
Please	return all correspondence concerning this matter to th	e following:		
	G. RIMMER COVINGTON			
		Name of Person		
	COVINGTON CIVIL & ENVIRONMEN	TAL LLC		
	F	irm/Company		
2510 14TH STREET, SUITE 1010				
		Address		
	GULFPORT, MISSISSIPPI 39501			
	City/S	State and Zip Code		
	rimmer@ccellc.us			
	E-mail address: (to be use	ed for future annual report no	otification)	
For furt	her information concerning this matter, please call:			
	RIMMER COVINGTON	228 396-0 at ( )		
	Name of Contact Person	Area Code Da	ytime Telephone Number	
	MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314	Division Registra Clifton I 2661 Ex	T ADDRESS: of Corporations tion Section Building tecutive Center Circle tisee, FL 32301	
Enclose	d 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 BY SINKESS IN THE STATE OF FLORIDA:

COMPANYTOTRANSACT B	USINESS IN THE STATE OF FLORIDA:			
	& ENVIRONMENTAL, LLC			
(Name of For	eign Limited Liability Company; must inclu	de "Limited Liability Company," "L.L.C.," o	r "LLC.")	
(If name unavailable, enter a Liability Company," "L.L.C,	Iternate name adopted for the purpose of tra	nsacting business in Florida. The alternate no	ame must include "Limited	
2 STATE OF MISSISSIF	PPI 3.			
(Jurisdiction under the law company is organized)	of which foreign limited liability	(FEI number, if applicabl	e)	
4. Not Applicable				
	(Date first transacted business in Fl (See sections 605.0904 & 605.0905, 1	orida, if prior to registration.)  3.S. to determine penalty liability)		
5. 2510 14TH STREET,	SUITE 1010		<del></del>	
GULFPORT, MISSIS	SIPPI 39501		<b>3</b> 0 =	f
	(Street Address of Principa	l Office)		ş.
6. 2510 14TH STREET,	SUITE 1010			u
GULFPORT, MS 395	01		5 5 T	,
	(Mailing Address	)		
7. Name and street address	ss of Florida registered agent: (P.O. Box	( <u>NOT</u> acceptable)		Ì
Name:	Your Capital Connection, Inc.		100 No.	
Office Address:	417 E. Virginia St. Ste 1.		<u> </u>	
<b></b>	Tallahassee	. Florida 32301		
	(City)	(Zip code)	жения	
designated in this applicato complywith the provisi	gistered agent and to accept service of tion, I hereby accept the appointment o ons of all statutes relative to the proper my position as registered agent.	is registered agent and agree to act in the and complete performance of my dutie	his capacity. I further a	gree
	Seth Neeley, for Your Capita	ent's signature) I Connection, Inc.		
8. The name, title or cap	acity and address of the person(s) who h	#\$/have authority to manage is/are:	ot Mississiddi 20581	
G. RIMMER COVINGTO	ON, MEMBER/MANAGER 2510 147			
M. TODD HAIRSTON, I		TREET, SUITE 1010. GULFPORT, N	<del></del>	
JOHN F. SZABO, MEM	BER/MANAGER 2510 14TH STREE	T, SUITE 1010. GULFPORT, MISSIS	SSIPPI 39501	
9. Attached is a certificate jurisdiction under the law of the translator must be s	of existence, no more than 90 days old, of which it is organized. (If the certifica ubmitted)	duly authenticated by the official having te is in a foreign language, a translation	g custody of records in the of the certificate under or	e ith
	Signature of an a	Cairl	_	
	Signature of an a	uthorized person		
This document is executed submitted in a document to	d in accordance with section 605.0203 (1 to the Department of State constitutes a t	) (b), Florida Statutes. I am aware that a aird degree felony as provided for in s.81	ny false information 7.155, F.S.	

Typed or printed name of signee

G. RIMMER COVINGTON



#### DELBERT HOSEMANN Secretary of State

## Office of the Secretary of State Jackson, Mississippi

### Certificate of Good Standing

I, C. DELBERT HOSEMANN, JR., Secretary of State of the State of Mississippi, and as such, the legal custodian of the records as required by The Mississippi Limited Liability Company Act to be filed in my office do hereby certify:

#### COVINGTON CIVIL & ENVIRONMENTAL, LLC

Registered the 28th day of May, 2008

A Mississippi Limited Liability Company has filed the necessary documents in this office and has obtained a certificate of formation under the provisions of The Mississippi Limited Liability Company Act as shown by the records in this office.

That the registered office of said Limited Liability Company is located at:

2510 14TH STREET, SUITE 1010 GULFPORT, MS 39501

And that the registered agent at that address is:

Covington, George Rimmer, Sr

I further certify that said Limited Liability Company has paid the fees for filing the above papers required by law as shown by the records of this office, and that said Limited Liability Company is in good standing to do business in Mississippi at this time.

Given under my hand and seal of office the 10th day of March, 2016

C. Delbert Hosemann, Jr. Secretary of State

Certificate Number: CN16021062

Verify this certificate online at http://corp.sos.ms.gov/corpconv/verifycertificate.aspx