M1600000 3485

(Re	equestor's Name)	
(Ad	dress)	
() -	-	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	⇒ #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	ocument Number)	
,	·	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



000281825660

02/08/16--01026--009 **160.00



J. HARRIS

COVER LETTER

	istration Section ' ision of Corporations		
SUBJECT:	Alamos Electric, LLC		
	Nam	e of Limited Liability Company	
The enclosed Existence, an	"Application by Foreign Limited Liability of discharge submitted to register the above to	Company for Authorization to Transact Business in Florida," Ce referenced foreign limited liability company to transact business	rtificate of in Florida
Please return	all correspondence concerning this matter to	the following:	
	Trevor B. Brown		
	-	Name of Person	
	Alamos Electric, LLC		
	Mantos Electric, EEC	Firm/Company	
		, ,	
	1409 Minnesota St.		
		Address	
	Orlando, FL 32803		
	C	ity/State and Zip Code	
	tr3vor8rown@gmail.com		
	E-mail address; (to be	used for future annual report notification)	
For further in	formation concerning this matter, please call	;	
	Trevor Brown	at (407) 580-9955	
·	Name of Contact Person	Area Code Daytime Telephone Number	
		·	
	ILING ADDRESS:	STREET ADDRESS:	
	sion of Corporations	Division of Corporations	
	stration Section	Registration Section Clifton Building	
	Box 6327	2661 Executive Center Circle	
t ana	thassee, FL 32314	Tallahassee, FL 32301	
		Tulidini3500, T.D. 3230 T	
	check for the following amount: 25.00 Filing Fee	& \$\Bigcup \\$155.00 \text{ Filing Fee & D\$\\$160.00 \text{ Filing Fee, Certified Copy} \\ Certified \text{ Copy} \text{of Status & Certified Copy}	icate



2816 APR 26 API 10: 37

FLORIDA DEPARTMENT OF STATE Division of Corporations

April 6, 2016

TREVOR B BROWN 1409 MINNESOTA ST ORLANDO, FL 32803

SUBJECT: ALAMOS <u>ELEC</u>TRIC, LLC

Ref. Number: W16000010097

We have received your document for ALAMOS ELECTRIC, LLC and your check(s) totaling \$160.00. However, the document has not been filed and is being retained in this office for the following:

The certificate of existence must be issued within the last 90 days by the Secretary of State which has custody of the records in the jurisdiction under the laws of which the above listed entity is incorporated/organized.

Please return 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.

Jenna D Harris Regulatory Specialist II

Letter Number: 616A00002834



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

IN COMPILANCE 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:

	,		imited Liability Company, ""L.L.	C., or LLC.	′	
If name unavailable, enter a lability Company," "L.L.C	ulternate name adopted for the purps	ose of transact	ing business in Florida. The altern	ale name musi	include "Lin	- nited
Kansas		3.	81-0767815			
(Jurisdiction under the law company is organized)	of which foreign limited liability	<i></i>	(FFI number, if app	icable)		•
·	Upon registration (Date first transacted busin	a construction dis	The state of the s			
	(See sections 605,0904 & 60	15.0905, F.S. 1	o determine penalty liability)			
1409 Minnesota	a St.					
Orlando, FL 3	32803					
	(Street Address of	f Principal Off	ice)			
. <u>1409 Minnesot</u>	a St					
Orlando, FL 3	32803					
		(Address)				
Name and street addres	ss of Florida registered agent: (F	P.O. Box NO	OT acceptable)			
Name:	Trevor B. Brown			ب . پيون	ري المحمد بري	
Office Address:	1409 Minnesota St.					• • •
	Orlando		, Florida <u>32803</u>	1. 	_	
	521,41140				4 No.	
	(City)		(Zip coo	le)	an Cir	•
	tance:		(Zip coo		and the contract of the contr	in gray
uving been named as re	tance: gistered agent and to accept ser	rvice of proce	(Zip coorss for the above stated limited	l liability com		
uving been named as re- esignated in this applical	tance: gistered agent and to accept ser tion, I hereby accept the appoin	rvice of proci	(Zip coors So for the above stated limited istered agent and agree to act	liability con in this capac	ity. I fyrthi	er aprice .
uving been named as re esignated in this applical complywith the provision	tance: gistered agent and to accept ser	rvice of procu ntment as reg proper und	(Zip coors So for the above stated limited istered agent and agree to act	l liability com in this capac duties, and J	ity. I fyrth äm familiyt =	er aprice .
uving been named as re esignated in this applical complywith the provision	tance: gistered agent and to accept ser tion, I hereby accept the appoin ons of all statutes relative to the	rvice of procu ntment as reg proper und	(Zip coors So for the above stated limited istered agent and agree to act	l liability com in this capac duties, and J	ity. I fyrthi	er aprice .
aving been named as re esignated in this applical complywith the provision	tance: gistered agent and to accept ser tion, I hereby accept the appoin ons of all statutes relative to the my position as registered agent.	rvice of procu ntment as reg proper und	(Zip coo ess for the above stated limited istered agent and agree to act complete performance of my	l liability com in this capac duties, and J	ity. I fyrth äm familiyt =	er aprice .
uving been named as re- esignated in this applical complywith the provision cept the obligations of n	tance: gistered agent and to accept ser tion, I hereby accept the appoin ons of all statutes relative to the my position as registered agent. (Regis	rvice of proce atment as reg proper and to select agent's s	(Zip coors	l liability com in this capac duties, and J	ity. I fyrth äm familiyt =	er aprice .
uving been named as re- esignated in this applical complywith the provision cept the obligations of n	tance: gistered agent and to accept ser tion, I hereby accept the appoin ons of all statutes relative to the my position as registered agent.	rvice of proce atment as reg proper and to select agent's s	(Zip coors	l liability com in this capac duties, and J	ity. I fyrth äm familiyt =	er aprice .
uving been named as re- esignated in this applical complywith the provision cept the obligations of n	tance: gistered agent and to accept ser tion, I hereby accept the appoin ons of all statutes relative to the my position as registered agent. (Regis acity and address of the person(s)	rvice of proce atment as reg proper und tiles ilered agent's s) who has/ha	(Zip coors	l liability com in this capac futles, and J	ity. I fyrth äm familiyt =	er aprice .
esignated in this applicate complywith the provision complywith the provision of the continues of the contin	tance: gistered agent and to accept ser tion, I hereby accept the appoin ons of all statutes relative to the my position as registered agent. (Regis acity and address of the person(s)	rvice of proce atment as reg proper und tiles ilered agent's s) who has/ha	(Zip coors for the above stated limited istered agent and agree to act complete performance of my displaying ignature) // authority to manage is/are;	l liability com in this capac futles, and J	ity. I fyrth äm familiyt =	er aprice .
laving been named as re- esignated in this applical complywith the provision coupt the obligations of n The name, title or capa Trevor B. Brown,	tance: gistered agent and to accept ser tion, I hereby accept the appoin ons of all statutes relative to the my position as registered agent. (Regis acity and address of the person(s) Manager t.	rvice of proce atment as reg proper und tiles ilered agent's s) who has/ha	(Zip coors for the above stated limited istered agent and agree to act complete performance of my displaying ignature) // authority to manage is/are;	l liability com in this capac futles, and J	ity. I fyrth äm familiyt =	er aprice .
laving been named as re- esignated in this applical complywith the provision coupt the obligations of notice The name, title or capa Trevor B. Brown, 1409 Minnesota St Orlando, FL 3280	tance: gistered agent and to accept ser tion, I hereby accept the appoin ons of all statutes relative to the my position as registered agent. (Regis acity and address of the person(s) Manager t.	rvice of procu atment as reg proper and p itered agent's s) who has/ha	(Zip coors	l liability com in this capac duties, and f	ity. I fuethi	with nu
aving been named as resignated in this applicated in this applicate complywith the provision cept the obligations of notice the obligations of notice the obligations of notice the name, title or capa Trevor B. Brown, 1409 Minnesota Storiando, FL 3280 Orlando, FL 3280 Attached is a certificate of	tance: gistered agent and to accept ser tion, I hereby accept the appoint ons of all statutes relative to the my position as registered agent. (Regis acity and address of the person(s) Manager t. 33	rvice of proce atment as reg proper and proper and proper and stered agent's s) who has/has	(Zip coors for the above stated limited istered agent and agree to act complete performance of my ingularity to manage is/are; authority to manage is/are; authority to the official has	l liability com in this capac duties, and f	ity. I furthing in familium	n the
aving been named as resignated in this applicate complywith the provision cept the obligations of name, title or capa Trevor B. Brown, 1409 Minnesota Storiando, FL 3280 Attached is a certificate of the structure of the capa of the cap	tance: gistered agent and to accept ser tion, I hereby accept the appoint ons of all statutes relative to the my position as registered agent. (Regis acity and address of the person(s) Manager t. 13 of existence, no more than 90 da of which it is organized. (If the c	rvice of proce atment as reg proper and proper and proper and stered agent's s) who has/has	(Zip coors for the above stated limited istered agent and agree to act complete performance of my ingularity to manage is/are; authority to manage is/are; authority to the official has	l liability com in this capac duties, and f	ity. I furthing in familium	n the
aving been named as resignated in this applicated in this applicate complywith the provision cept the obligations of notice the obligations of notice the name, title or capa Treyor B. Brown, 1409 Minnesota St. Orlando, FL 3280 Attached is a certificate of isdiction under the law of the second content of the	tance: gistered agent and to accept ser tion, I hereby accept the appoint ons of all statutes relative to the my position as registered agent. (Regis acity and address of the person(s) Manager t. 13 of existence, no more than 90 da of which it is organized. (If the c	rvice of proce atment as reg proper and proper and proper and stered agent's s) who has/has	(Zip coors for the above stated limited istered agent and agree to act complete performance of my ingularity to manage is/are; authority to manage is/are; authority to the official has	l liability com in this capac duties, and f	ity. I furthing in familium	n the
aving been named as resignated in this applicated in this applicate complywith the provision cept the obligations of name, title or capa Trevor B. Brown, 1409 Minnesota Storiando, FL 3280 Attached is a certificate disdiction under the law of the capa of the	tance: gistered agent and to accept ser tion, I hereby accept the appoin ons of all statutes relative to the my position as registered agent. (Regis acity and address of the person(s) Manager t.)3 of existence, no more than 90 da of which it is organized. (If the co-	rvice of processment as reg e proper und silered agent's s) who has/has ays old, duly ertificate is in	(Zip coors for the above stated limited istered agent and agree to act complete performance of my initial ignature) we authority to manage is/are; authenticated by the official has a foreign language, a translat	l liability com in this capac duties, and f	ity. I furthing in familium	n the
aving been named as resignated in this applicated in this applicate complywith the provision cept the obligations of notice the obligations of notice the name, title or capa Trevor B. Brown, 1409 Minnesota St. Orlando, FL 3280 Attached is a certificate of isdiction under the law of the translator must be sufficient or the sufficient of the translator must be sufficient or the sufficient of the translator must be sufficient or the sufficient of the translator must be sufficient or the sufficient of the translator must be sufficient or the sufficient of the translator must be sufficient or the sufficient of the suffici	tance: gistered agent and to accept ser tion, I hereby accept the appoint ons of all statutes relative to the my position as registered agent. (Regis acity and address of the person(s) Manager t. 13 of existence, no more than 90 da of which it is organized. (If the cibmitted)	rvice of processment as reg e proper und silered agent's s) who has/had ays old, duly ertificate is in	(Zip coors for the above stated limited istered agent and agree to act complete performance of my displaying the c	liability comin this capaciduties, and final factorial f	of records i	n the
ring been named as resignated in this application this application the provision complywith the provision cept the obligations of name, title or capa Trevor B. Brown, 1409 Minnesota St. Orlando, FL 3280 Attached is a certificate of soliction under the law of the translator must be sulted to document is executed in the content of the c	tance: gistered agent and to accept ser tion, I hereby accept the appoin ons of all statutes relative to the my position as registered agent. (Regis acity and address of the person(s) Manager t.)3 of existence, no more than 90 da of which it is organized. (If the co-	rvice of processment as regardered agent's silered agent's sil	(Zip coors for the above stated limited istered agent and agree to act complete performance of my dispature) The authority to manage is/are; authenticated by the official has a foreign language, a translated person Florida Statutes. I am aware the	it liability com in this capac duties, and f	of records infination	n the

Typed or printed name of signee

STATE OF KANSAS OFFICE OF SECRETARY OF STATE KRIS W. KOBACH

I, KRIS W. KOBACH, Secretary of State of the state of Kansas, do hereby certify, that according to the records of this office.

Business Entity ID Number: 4972881

Entity Name: ALAMOS ELECTRIC, LLC

Entity Type: KANSAS LTD LIABILITY COMPANY

State of Organization: KS

Resident Agent: BRUCE M. BROWN

Registered Office: 9314 E WILSON ESTATES CT., WICHITA, KS 67206

was filed in this office on December 08, 2015, and is in good standing, having fully complied with all requirements of this office.

No information is available from this office regarding the financial condition, business activity or practices of this entity.



In testimony whereof I execute this certificate and affix the seal of the Secretary of State of the state of Kansas on this day of April 21, 2016

KRIS W. KOBACH SECRETARY OF STATE

Certificate ID: 792574 - To verify the validity of this certificate please visit https://www.kansas.gov/bess/flow/validate and enter the certificate ID number.