

M16000003848

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

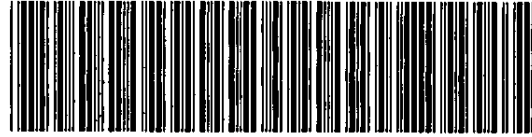
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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05/12/16--01013--008 **125.00

FILED
16 MAY 12 PM 2:19
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MAY 13 2016
Y SULKER

JOHN S. BALL*

HARRIS L. BONNETTE, JR.*

ANNE BUZBY-WALT*

A. HAMILTON COOKE*

ROBERT A. DAWKINS*

JOHN F. FANNIN

LAURA FANNIN JACQMEIN

CHRISTAL L. FISH

MICHAEL W. FISHER**

BEVERLY H. FURTICK*

ANN S. HIBBLE

MARVIN C. KLOEPPPEL*

JOHN E. LAWLOR, III**

MICHAEL R. LEAS*

RYAN M. LUDWICK

ROBERT N. MILLER*

KRISTA WALDRON RAY

MARY A. ROBISON*

CLAY B. TOUSEY, JR.*

CLAY B. TOUSEY III

W. HAMILTON TRAYLOR

SHANNON P. VALENTINE*



PLEASE REPLY TO: JACKSONVILLE OFFICE

www.fishertousey.com

FISHER, TOUSEY, LEAS & BALL
ATTORNEYS AT LAW

May 10, 2016

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

Re: Application by Foreign Limited Liability Company for Authorization to Transact
Business in Florida

To Whom It May Concern:

Enclosed please find an Application by Foreign Limited Liability Company for
Authorization to Transact Business in Florida for Orion Contracting, LLC, in duplicate, along
with a Good Standing Certificate obtained from the State of Delaware. Also enclosed is a check
made payable to the Florida Secretary of State for \$125.00 which represents the required fee.

We kindly request that Orion Contracting, LLC us Orion Construction, LLC within the
State of Florida.

Please return a confirmed copy of the Application to me in the provided envelope.

If you have any additional questions, please contact me at (904) 356-2600 ext. 340.

Sincerely,

A handwritten signature in black ink that reads "Traci L. Venable".

Traci L. Venable
Paralegal

Enclosures
617778

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Orion 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:

Marvin C. Kloeppel

Name of Person

Fisher, Tousey, Leas & Ball, P.A.

Firm/Company

501 Riverside Avenue, Suite 600

Address

Jacksonville, Florida 32202

City/State and Zip Code

tlv@fishertousey.com

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

For further information concerning this matter, please call:

Marvin Kloeppel

904 356-2600
at ()

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. Orion Contracting, LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

Orion Construction, 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. Delaware 3. 35-2541125
(Jurisdiction under the law of which foreign limited liability company is organized) (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)

5. 10151 University Boulevard, Suite 287
Orlando, Florida 32817
(Street Address of Principal Office)

6. 501 Riverside Avenue, Suite 600
Jacksonville, Florida 32202
(Mailing Address)

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

Name: Fisher, Tousey, Leas & Ball, P.A.
Office Address: 501 Riverside Avenue, Suite 600
Jacksonville, Florida 32202
(City) (Zip code)

FILED
16 MAY 12 PM 2:19
CLERK OF STATE
TALLAHASSEE, FLORIDA

Registered agent's acceptance:

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 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.

Marvin C. Kloeppel
(Registered agent's signature)

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

<u>Foundation Management, LLC., Manager</u>	<u>Tommy Thompson, a Vice President</u>
<u>501 Riverside Avenue, Suite 600</u>	<u>10151 University Boulevard, Suite 287</u>
<u>Jacksonville, Florida 32202</u>	<u>Orlando, Florida 32817</u>

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)

Marvin C. Kloeppel
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.

Marvin Kloeppel, as Manager of Foundation Manager, LLC, as Manager

Typed or printed name of signee

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Office Address: 501 Riverside Avenue, Suite 600

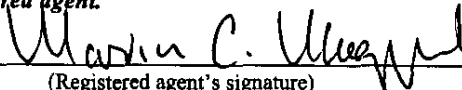
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Foundation Management, LLC., Manager

Tommy Thompson, a Vice President

501 Riverside Avenue, Suite 600

10151 University Boulevard, Suite 287

Jacksonville, Florida 32202

Orlando, Florida 32817

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Marvin Kloeppel, as Manager of Foundation Manager, LLC, as Manager

Typed or printed name of signer

RECEIVED
DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

16 MAY 12 10 19 AM '19

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ORION CONTRACTING, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE SIXTH DAY OF MAY, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ORION CONTRACTING, LLC" WAS FORMED ON THE TENTH DAY OF AUGUST, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.



5800922 8300

SR# 20162912550

You may verify this certificate online at corp.delaware.gov/authver.shtml

A handwritten signature in black ink, appearing to read "JWB", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed.

Jeffrey W. Bullock, Secretary of State

Authentication: 202274182

Date: 05-06-16