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16 NOV 29 PH 4: 56



FLORIDA DEPARTMENT OF STATE Division of Corporations

November 29, 2016

CRAIG THOMPSON P.O. BOX 971 FOLEY, AL 36536

SUBJECT: CABINETRY AND TRIMWORKS LLC

Ref. Number: W16000079788

We have received your document for CABINETRY AND TRIMWORKS LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

Pursuant to s.605.0902(1)(e), Florida Statutes, the document must contain the name, title or capacity and address of at least one person who has the authority to manage the foreign limited liability company.

Please return your document, along with 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.

Deborah Bruce Regulatory Specialist II

Letter Number: 716A00025414

COVER LETTER

Registration Section

TO:

	ion of Corporation	mworks LLC						
SUBJECT: _	· · · · · · · · · · · · · · · · · · ·							
		oreign Limited Liability Com ted to register the above refer						
Please return a	all correspondence	concerning this matter to the	following:					
	Craig A. Thor	npson						
	Name of Person						•	
	Cabinetry And Trimworks LLC						~	
	Firm/Company						•	
	PO Box 971							
	Address $\sum_{i=1}^{N} \sigma_i$				ALI ALI	2011		
	Foley, AL. 36	536				CRET	0E NON 3102	7
		City/S	State and Zip Code	:	 	SSE	30	Г
	CraigT@CabA	ndTrim.eom				ارد (بران)	ס	<u></u>
		E-mail address: (to be use	d for future annua	l report no	tification)	STAT ORI	÷	
For further inf	ormation concerni	ng this matter, please call:				D CT	ū	
Craig	z Thompson		251 at (752-52	290			
	Name	of Contact Person	Area Code	Da	ytime Telephone l	Number		
Divis Regis P.O.	LING ADDRESS ion of Corporation stration Section Box 6327 hassee, FL 32314			Division Registra Clifton E 2661 Ex	F ADDRESS: of Corporations tion Section Building ecutive Center Cir see, FL 32301	rcle		
	check for the follow 25.00 Filing Fee	wing amount: ☐ \$130.00 Filing Fee & Certificate of Status	□ \$155.00 Fili Certified Copy		■ \$160.00 Fili of Status & Cer			•

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:

Cabinetry And Trimwo		ude "Limited Liability Company," "L.L.C.,"	or of 1 C '')	
(Name of Fore	agn Limited Liability Company; must incli	ude "Limited Liability Company, L.L.C.,	or "LLC.)	
(If name unavailable, enter al Liability Company," "L.L.C,"		ansacting business in Florida. The alternate n	ame must include "	Limited
, Alabama	3.	81-4463596		
(Jurisdiction under the law company is organized)	of which foreign limited liability	(FEI number, if applicab	le)	_
4			_	
5 15845 St Hwy 59, Un	(Date first transacted business in F (See sections 605,0904 & 605,0905,	F.S. to determine penalty liability)		
5. 13643 SCHWY 39, OII	IL A			
Foley, AL. 36535			_=	
6. PO Box 971	(Street Address of Princip	oal Office)	2016 NOV 30 SECRETARY ALLAHASSE	77
Foley, AL 36536			OV 3	
	(Mailing Addres	38)	m _C	Ш
7. Name and street addres	s of Florida registered agent: (P.O. Bo	ox <u>NOT</u> acceptable))F S	Ö
Name:	Bill Davis		RIATE F	
Office Address:	4819 Hickory Shores Blvd		⊝' ພ	
	Gulf Breeze	, Florida <u>32563</u>		
	(City)	(Zip code)	_	
designated in this applicate to complywith the provision	gistered agent and to accept service of tion, I hereby accept the appointment ons of all statutes relative to the property position as registered agent.	f process for the above stated limited lia as registered agent and agree to act in a r and complete performance of my duti gent's signature)	this capacity. I fu	urther agree
•	ncity and address of the person(s) who leer, 10110 Longview Dr., Foley, AL	has/have authority to manage is/are:		
	of which it is organized. (If the certification)	d, duly authenticated by the official having ate is in a foreign language, a translation authorized person		
		,		
This document is executed submitted in a document to	in accordance with section 605.0203 (the Department of State constitutes a t	1) (b), Florida Statutes. I am aware that a hird degree felony as provided for in s.8.	ny false informati 17.155, F.S.	on

Typed or printed name of signee

Craig A. Thompson

John H. Merrill Secretary of State P.O. Box 5616 Montgomery, AL 36103-5616

State of Alabama

I, John H. Merrill, 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 Cabinetry and Trimworks LLC was formed in Baldwin County, Alabama on November 18, 2016. The Alabama Entity Identification number for this entity is 376-973. I further certify that the records do not disclose that said entity has been dissolved, cancelled or terminated.



20161129000009588

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.

11/29/2016

Date

X.W. Menill

John H. Merrill

Secretary of State