(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	TIAW T	MAIL
(Bu	siness Entity Nar	ne)
,	•	•
(Do	cument Number)	
(20		
Cortified Coninc	Cortificator	s of Status
Certified Copies	_ Certificates	s or Status
Special Instructions to	Filing Officer:	

Office Use Only



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V.S 12106/16



FLORIDA DEPARTMENT OF STATE Division of Corporations

November 9, 2016

KRISTEN BLAZEVICH HOBBS PO BOX 1229 THONOTOSASSA, FL 33592 US

SUBJECT: CHARLIE'S PAVING LLC

Ref. Number: W16000076070

2016 DEC -5 PM 12: 17
SEORLIARY OF STATE
SEORLIARSEE, FLORIDA

We have received your document for CHARLIE'S PAVING 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:

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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.

Yasemin Y Sulker Regulatory Specialist II

Letter Number: 316A00024107

COVER LETTER

	on of Corporation	ns				
SUBJECT:	harlie's Paving LL	С				
		Name of I	Limited Liability (Company		-
The enclosed " Existence, and	Application by For check are submitte	reign Limited Liability Comp d to register the above refere	any for Authoriza	ition to Tra ted liability	nsact Business in Florida, company to transact busi	" Certificate of ness in Florida
Please return a	l correspondence o	concerning this matter to the	following:			
	Kristen Blazevi	ich Hobbs				
		Na	ime of Person	· · ·		-
	MB Accounting	g & Tax Services Inc.				
	Firm/Company					
	P.O. Box 1229					
			Address			-
	Thonotosassa, I	FL. 33592				
		City/St	ate and Zip Code			-
	mbtaxlady@aol.c	com				
		E-mail address: (to be used	for future annual	report noti	ification)	-
For further info	rmation concernin	g this matter, please call:				
Kriste	n Blazevich Hobb	S	813 at (986-449	93	
	Name o	f Contact Person	Area Code	Day	time Telephone Number	-
Divisi Regist P.O. E	ING ADDRESS: on of Corporations ration Section fox 6327 assee, FL 32314			Division of Registration Clifton Bu 2661 Exec	ADDRESS: of Corporations on Section uilding cutive Center Circle ee, FL 32301	
	neck for the follow 5.00 Filing Fee	ing amount: \$\Bigsize \\$130.00 \text{ Filing Fee & Certificate of Status}\$	□ \$155.00 Filir Certified Copy	ng Fee &	■ \$160.00 Filing Fee, C of Status & Certified Co	

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

(If name unaveilable, onter a)					
(If name unavailable, enter al	ilgn Limited Liebility	Company; must include "I	Similed Liability Company," "L.L.C.," or 'I	LC.")	•
Liability Company," "L.L.C,"	ternate name adopted "or "LLC.")	- "	ting business in Florids. The alternate name	must include "Lin	ojted -
2 Ohio		3, 81-	4301420		_
(Junistiction under the law company is organized)	of which foreign limit	ind liability	(FEI number, If applicable)		_
4	(Date first tre	mached business in Florid	a, if grior to registration.) to determine penalty liability)		
4644 Hwy 601, Norwa		13.0904 & 603.0903, K.B. E	o desamine benettà frantità)		
				•	,
	(Stre	et Address of Principal Of	fice)		
6. 4644 Hwy 601, Norwall	•				
		(anesthing Address)			
7. Name and street address	g of Florida register	ed agent: (F.O. Box N	OT acceptable)		
Nama:	MB Accounting &	t Tax Services Inc.			
Office Address:	11706 N US Hwy	301			161
	Thomotosassa		, Florida 33592	51.6°	26
	**************************************	(City)	(Zip code)	. SS	()
Rugistured agent's accept Harbre been named as rej		to accept service of pro-	ours for the above stated limited liabilit	y company at the	a place
designated in this applicat to complimable the provide	ilan, I kereby accep	i the appointment as re	igistered agent and agree to act in this d complete performance of my duties, o	capacity, Literal	ter antes
accept the obligations of a			s conducts had a section of the grounds to	025	
	Krister	r Bloseviel	Hobbs	E	12
		(Registored agent's	i pignature)		
				•	•
S. The name, title or caps	icity and address of	the person(s) who has/h	ave authority to manage is/are:	•	•
 The name, title or capa Charles Swarts, Manager, 		- ·	ave authority to manage is/are;		,
	4644 Hwy 601, No	rwalk, OH 44857	ave authority to manage is/are;		

UNITED STATES OF AMERICA STATE OF OHIO OFFICE OF THE SECRETARY OF STATE

I, Jon Husted, do hereby certify that I am the duly elected, qualified and present acting Secretary of State for the State of Ohio, and as such have custody of the records of Ohio and Foreign business entities; that said records show CHARLIE'S PAVING LLC, an Ohio For Profit Limited Liability Company, Registration Number 3955327, was organized within the State of Ohio on November 1, 2016, is currently in FULL FORCE AND EFFECT upon the records of this office.



Witness my hand and the seal of the Secretary of State at Columbus, Ohio this 1st day of December, A.D. 2016.

Ohio Secretary of State

Jan Hustel

Validation Number: 201633601756