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Division of Corporations

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Account Number : I20120000007 Phone : (702)866-2500 Fax Number : (702)866-2689

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Foreign Limited Liability Company Crescent Project Management Services, LLC

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COVER LETTER

TO:	Registration Se Division of Cor						
Crescent Project Management Services, LLC							
3011013	SUBJECT:Name of Limited Liability Company						
						nsact Business in Florida," company to transact busin	
Please r	eturn all correspo	ndence conce	rning this matter to the f	ollowing:			
			Ju	stin Foster			
Name of Person							
InCorp Services, Inc.							
Firm/Company							
			3773 Howard Hu	ghes Pkwy. · S	Sulte 500	S 	
				Address			
Las Vegas, NV 89169-6014							
City/State and Zip Code							
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For furt	her information co		matter, please call:	ioi ioinic amuni	report non		
	Justin Foster		InCorp Services, Inc.	(866-		
Name of Contact Person Area Code Daytime Telephone Number							
	MAILING ADI Division of Corp Registration Sec P.O. Box 6327 Tallahassee, FL	orations tion			Division of Registration But 2661 Execution But 266		
Enclose	d is a check for th ☐ \$125.00 Filin	gFee 🗓 🕏	mount: 130,00 Filing Fee & rtificate of Status	■ \$155,00 Filin Certified Copy	g Fee &	□ \$160.00 Filing Fee, C of Status & Certified Cop	

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 COMPANYTO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

	agement Services, LLC					
(Name of Fore	ign Limited Liability Company; must inc	lude "Limited Liab	ility Company," 'L.L.C.," or	"LLC.")		
(If name unavailable, enter alt	crnate name adopted for the purpose of to	ransacting business	in Florida. The alternate nan	ne must incl	lude "Limi	ited
Liability Company," "L.L.C," 2. Virginia	or LLC.)					
(Jurisdiction under the law of company is organized)	of which foreign limited liability	3	(FEI number, if applicable)		
4. Upon Registration	(Date first transacted business in (See sections 605,0904 & 605,0905	Florida, if prior to	registration.)	-		
5. 10306 Eaton Place Si		, i .d. to getermine	penalty nationally	_		
Fairfax	VA (Street Address of Princi	22030 inal Office)		_		
6. 10306 Eaton Place Su				_		
Fairfax	VA (Mailing Addre	22030		-		
7 Nove and street address	· -		able)			
7. Name and street address	s of Florida registered agent: (P.O. B InCorp Services, Inc.	iox <u>ivo i</u> accepu	1016)			
Name:	incorp services, inc.	·····	-		7	
Office Address:	17888 67th Court North		•	**************************************	25	
	Loxahatchee		, Florida 33470 (Zip code)		30	.,
Registered agent's accept	(City)		(Zip code)	$\mathcal{T}_{\mathcal{L}}$	200	, engales
Having been named as req designated in this applicat to complywith the provision	gistered agent and to accept service of ton, I hereby accept the appointmen ons of all statutes relative to the prop my position as registered agent.	it as registered as	gent and agree to act in til	is copacity	p. Ffurth	er agree
	shot xorte	Justin	Foster on behalf of InCo	rp Servic	es, Inc.	
	(Registered	agent's signature)				
	city and address of the person(s) who aging Member, 10306 Eaton F		_			
Caroline George, Mer	nber, 10306 Eaton Place, Sult	e 430, Fairfax	, VA 22030			
					,	
9. Attached is a certificate jurisdiction under the law of the translator must be su	of existence, no more than 90 days of of which it is organized. (If the certifiabmitted)	d, duly authentic icate is in a forcis	ated by the official having in language, a translation o	custody of f the certif	f records : Teate und	in the er oath
		authorized person	<u> </u>	-		
This document is executed submitted in a document to	in accordance with section 605,0203 the Department of State constitutes	(1) (b), Florida S a third degree felo	Statutes, I am aware that an ony as provided for in s.81	y false info 7.1 55, F.S .	ormation	
	·	George				
	Typed or printe	d name of signee		_		

Commondaealth of Hirginia



State Corporation Commission

CERTIFICATE OF FACT

I Certify the Following from the Records of the Commission:

That Crescent Project Management Services, LLC is duly organized as a limited liability company under the law of the Commonwealth of Virginia;

That the date of its organization is December 27, 2016; and

That the limited liability company is in existence in the Commonwealth of Virginia as of the date set forth below.

Nothing more is hereby certified.



Signed and Sealed at Richmond on this Date: January 10, 2017

Joel H. Peck, Clerk of the Commission

CISECOM

Document Control Number: 1701106451

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

IN COMPILANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SURMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANYTO TRANSACT BUSINESS IN THE STATE OF FLORIDA;

	nagement Services, LLC ign Limited Liability Company; must include "Li	The state of the s	er i com		·
(Name of Pore	iga caanea cisonay company, masi mende - Ci	mnee Liability Company, L.L.C., or	LLL.)		
(If name unavailable, enter al Liability Company," "L.L.C,"	ternate name adopted for the purpose of transaction "LLC.")	ng business in Florida. The alternate nam	e must incl	uđe "L in	rited
2. Virginia	3.				
(Jurisdiction under the law company is organized)	of which foreign limited liability	(FEI number, if applicable			•
4. Upon Registration	(Date first transported business in Morida	if prior to registration \	.		
5 10306 Eaton Place S	(Date first transacted business in Florida, (See sections 605.0904 & 605.0905, F.S. to	determine penalty liability)			
5. TOSOG Editori Frace 3	uite 430		-		
Fairfax	VA (Street Address of Principal Offi	22030	_		
6. 10306 Eaton Place Su	•				
Fairfax	VA	22030	201		
	(Mailing Address)		- F.	17	
7. Name and street addres	s of Florida registered agent: (P.O. Box NC	T acceptable)	į Liv	A	
Name:	inCorp Services, Inc.			30	
Office Address:	17888 67th Court North	~ .	1-4		er Standa
	Loxahatchee	, Florida 33470			ş
Registered agent's accept	(City)	(Zip code)		0	
Having been named as red designated in this applica- to complywith the provision	gistered agent and to accept service of proceion, I hereby accept the appointment as regular of all statutes relative to the proper and my position as registered agent. (Registered agent's	istered agent and agree to act in the complete performance of my duties Justin Foster on behalf of InCo	is capacity , and I am	. I furti gamilia	her agree ur with and
•	city and address of the person(s) who has/ha aging Member, 10306 Eaton Place,	=			
	mber, 10306 Eaton Place, Suite 430,				
Cardina George, Mai	TIDEL, 10000 EAGOT Flave, Suite 450,	Talliax, VA 22000			
jurisdiction under the law of the translator must be su This document is executed	Signature of on authors in accordance with section 605.0203 (1) (b), the Department of State constitutes a third department of State constitutes as the department of State co	zed person Florida Statutes, I am aware that an egree felony as provided for in s.817	f the certifi - y false info	icate uno	der oath
	Michael Geor	ge			

Typed or printed name of signee

Commonbrealth of Hirginia



State Corporation Commission

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