

M17000005902

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

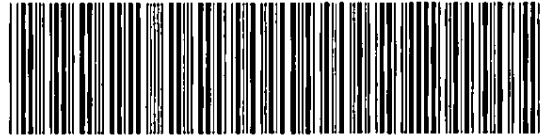
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TALLAHASSEE, FLORIDA

JUL 13 2017

Y SULKER



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 3, 2017

CYNTHIA A GIBSON
350 S INDUSTRIAL PKWY
YAZOO CITY, MS 39194 US

SUBJECT: SHACKELFORD CONSTRUCTION & HAULING, LLC
Ref. Number: W17000054483

We have received your document for SHACKELFORD CONSTRUCTION & HAULING, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Effective January 1, 2014, all limited liability company forms must be submitted in accordance with the Revised Limited Liability Company Act, Chapter 605, Florida Statutes.

We are enclosing the proper form(s) with instructions for your convenience.

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: 017A00013316

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Shackelford Construction & Hauling, 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:

Cynthia A Gibson

Name of Person

Shackelford Construction & Hauling, LLC

Firm/Company

350 S Industrial Pkwy

Address

Yazoo City, MS 39194

City/State and Zip Code

cindy@shackelfordconst.com

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

For further information concerning this matter, please call:

Cynthia A Gibson

662

746-5112

Name of Contact Person

at (_____)_____
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. Shackelford Construction & Hauling, LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
N/A

(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. Mississippi 3. 27-2358411
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. N/A
(Date first transacted business in Florida, if prior to registration)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 350 S. Industrial Pkwy 6. 350 S Industrial Pkwy
(Street Address of Principal Office) (Mailing Address)
Yazoo City, MS 39194 Yazoo City, MS 39194

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

Name: CT Corporation System
Office Address: 1200 South Pine Island Road
Plantation, Florida 33324
(City) (Zip code)

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.

Rachel Glashen
Vice President & Assistant Secretary
(Registered agent's signature)

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

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
<u>Managing Member</u>	<u>Roy L Shackelford, Jr.</u>		
<u>Qualifying Agent</u>	<u>Cynthia A Gibson</u>		
	<u>309 Tom Coke Road</u>		
	<u>Mendenhall, MS 39114</u>		

(Use attachments if necessary)

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)

10. 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.

Cynthia A Gibson
Signature of an authorized person

Cynthia A Gibson
Typed or printed name of signer



DELBERT HOSEMANN
Secretary of State

Office of the Secretary of State
Jackson, Mississippi

Certificate of Good Standing

I, C. DELBERT HOSEMANN, JR., Secretary of State of the State of Mississippi, and as such, the legal custodian of the records as required by The Mississippi Limited Liability Company Act to be filed in my office do hereby certify:

SHACKELFORD CONSTRUCTION & HAULING, LLC

Registered the 1st day of April, 2010

A Mississippi Limited Liability Company has filed the necessary documents in this office and has obtained a certificate of formation under the provisions of The Mississippi Limited Liability Company Act as shown by the records in this office.

That the registered office of said Limited Liability Company is located at:

1491 Ingram Road; PO Box 301
Benton, MS 39039

And that the registered agent at that address is:

Shackelford, Roy Lee, Jr

I further certify that said Limited Liability Company has paid the fees for filing the above papers required by law as shown by the records of this office, and that said Limited Liability Company is in good standing to do business in Mississippi at this time.

Given under my hand and seal of office
the 27th day of June, 2017

A handwritten signature in dark ink that reads "C. Delbert Hosemann, Jr." The signature is written in a cursive style.

C. DELBERT HOSEMANN, JR.
Secretary of State

Certificate Number: CN17038996

Verify this certificate online at <http://corp.sos.ms.gov/corpconv/verifycertificate.aspx>