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(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nar	ne)
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Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer;	
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#### **COVER LETTER**

TO:

то:	Registration Section Division of Corporations					
CI III II	NOT.	Alloy Crane & Mach	ninery LLC			
SUBJI	sci:	Name of L	imited Liability (	Company	·	
	closed "Application by Foreign nce, and check are submitted to					
Please	return all correspondence conce	erning this matter to the f	following:			
		Christine G.	MacMillan			
		Na	me of Person			
		Alloy Crane &	Machinery LLC			
		Fir	m/Company			
		1618 Dean Fo	rest Road			
			Address		<del></del>	
		Garden City,	GA 31418			
		City/Sta	ate and Zip Code			
		chrismacmillan@all	loycrane.com			
	Е-1	mail address: (to be used	for future annual	report not	ification)	
For fur	ther information concerning this	s matter, please call:				
	Christine G. MacMillan		912 at (	966-228	35	
	Name of Co	ontact Person	Area Code	Day	time Telephone Number	
	MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314			Division of Registrati Clifton B 2661 Exe	ADDRESS: of Corporations on Section uilding cutive Center Circle ee, FL 32301	
Enclos	2	amount: \$130.00 Filing Fee & ertificate of Status	□ \$155.00 Filin Certified Copy	g Fee &	■ \$160.00 Filing Fee, C of Status & Certified Co	

# 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 HIMITED HABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

ame unavailable, enter alternate na	ime adopted for the purpose of transacting business in	Florida. The al	ternate name must include "Limited Liabilit	y Company," "L.L.	.C," or "1	LC.")
State of Georgia		3.	82-2440602			
(Jurisdiction under the law of wh	ich foreign limited liabibity company is organized)		(Fill ournber,	d applicable)		_
October 1, 2017			· · · · · · · · · · · · · · · · · · ·			
	(1) ate first transacted business in Florida, if prior (See sections 605 0904 & 605,0905, E.S. to dete	amine penalty	liability)			
1618 Dean Forest Roa		6,	P.O. Box 18397	. <u> </u>		_
(Street Address of P			Cooden City C.A. 71419	s) 		
Garden City, GA 314	08		Garden City, GA 31418		_=	
			<del></del>	<del></del>	<del>-                                    </del>	_
					\ <u>\</u>	
Name and street addres	s of Florida registered agent: (P.O. B	ox <u>NOT</u>	(cceptable)	in the	2	
Name:	Oliver F. Tilton			ī., .	<b>P</b>	r-1
	2475 Lloyd Road			<del></del> (,,		/
Office Address:	2475 13.030 10.000		<del></del>	육장	£.	
			20264		بب	
	Jacksonville		, Florida	52 55	<del></del>	
signated in this application comply with the provision	tance: gistered agent and to accept service of tion, I hereby accept the appointment ions of all suggest relative to the prop s of my position as registered accept.	as registorer and co	ered agent and agree to act it	i this capacity	y. I fu	rther a
wing been named as re signated in this applica comply with the provisi d accept the obligation:	tance: gistered agent and to accept service of tion, I hereby accept the appointment ons of all steppings relative to the pipers of my position as registered received.	t as registerer and co	(Zip oods)  for the above stated limited liered agent and ugree to act it implete performance of my di	i this capacity	y. I fu	rther a
wing been named as re signated in this applica comply with the provisi d accept the obligation:	tance: gistered agent and to accept service of tion, I hereby accept the appointment ions of all suggest relative to the prop s of my position as registered accept.	t as registioner and co	(Zip oods)  for the above stated limited liered agent and ugree to act it implete performance of my di	i this capacity	y. I fu u fami	rther a liar w
wing been named as resignated in this applications on the provision accept the obligations.  The name, title or caps	tance: gistered agent and to accept service of tion. I hereby accept the appointment ons of all suppoint relative to the property of my position as registered received agencies and address of the person(s) who	t as registioner and co	(Zip code)  for the above stated limited limit	ı thix capacit dies, and I ar	y. I fu u fami	rther a liar w
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wing been named as resignated in this applications on the provision of accept the obligations.  The name, title or capa Title or Capacity:	tance: gistered agent and to accept service of the appointment ons of all steprings relative to the appointment of my position as registered agent.  acity and address of the person(s) who Name and Address:  J. Kelly MacMillan  1618 Dean Forest Road	t as registioner and co	(Zip code)  for the above stated limited limit	ı thix capacit dies, and I ar	y. I fu u fami	rther a liar w
wing been named as resignated in this applications of accept the obligations.  The name, title or caps Title or Capacity:  President	tance: gistered agent and to accept service of tion, I hereby accept the appointment on of all steppings relative to the property of my position as registered agent.  Accidental agent and address of the person(s) who Name and Address:  J. Kelly MacMillan  1618 Dean Forest Road  Garden City, GA 31408	t as registioner and co	(Zip code)  for the above stated limited limit	ı thix capacit dies, and I ar	y. I fu u fami	rther a liar w
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Control Number: 17086679

### STATE OF GEORGIA

## **Secretary of State**

Corporations Division 313 West Tower 2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530

#### CERTIFICATE OF EXISTENCE

I, Brian P. Kemp, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

Alloy Crane & Machinery LLC
a Domestic Limited Liability Company

was formed in the jurisdiction stated below or was authorized to transact business in Georgia on the below date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

Docket Number : 14798732 Date Inc/Auth/Filed: 08/07/2017 Jurisdiction : Georgia Print Date : 08/21/2017

Form Number : 211



Brian P. Kemp Secretary of State