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COVER LETTER

Registration Section

Division of Corporations

TO:

SUBJECT:	IES CONSTRUCT	ION LLC			
SOBJECT.		Name of	Limited Liability	Company	
				ation to Transact Business ir ited liability company to tran	
Please return	n all correspondence	concerning this matter to the	following:		
	JAMES DAVI	s			
		N	ame of Person	· · · · · · ·	
	IST UNITED	CRS, LLC			
	· · · · · · · · · · · · · · · · · · ·	F	irm/Company		
	4583-A CAPIT	AL CIRCLE NW			
			Address		
	TALLAHASS	EE, FL 32303			
		City/S	State and Zip Code	:	
	cc@unitedcrs.co	m			
		E-mail address: (to be use	d for future annua	report notification)	
For further i	information concerning	g this matter, please call:			
JA	MES DAVIS		850 at (322-7117	
	Name o	of Contact Person	Area Code	Daytime Telephone	Number!
<u>M</u> .	AILING ADDRESS:			STREET ADDRESS:	_ <u> </u>
Div	vision of Corporation:			Division of Corporations	· —
	gistration Section			Registration Section (#	. ज :- न
	D. Box 6327			Clifton Building	Cle T
Tal	llahassee, FL 32314			2661 Executive Center Çir Tallahassee, FL 32301	· •
nclosed is	a check for the follow	ving amount:		i i i i i i i i i i i i i i i i i i i	
	\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	□ \$155.00 Fili Certified Copy	ng Fee & 🗆 \$160.00 Fili	ng Fee, Certificate

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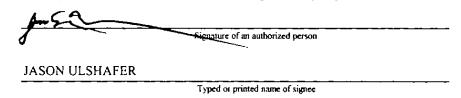
APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

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:

CONSTRUCTION C	Limited Liability Company; must include "Limit DE PA. LLC				
	name adopted for the purpose of transacting business in Fl	orida. The a	ternate name must include "Limited Liab	pility Company	," "L.L.C," or "LLC.")
A			46-3872571		
	hich foreign limited liability company is organized)	3.	(FEI numb	er, if applicable	e)
JPON REGISTRATION	ON				
STOT REGISTRATION	(Date first transacted business in Florida, if prior to (See sections 605,0904 & 605,0905, F.S. to determ	registration	.) liability)		
6 HAGERTY BLVD	·		16 HAGERTY BLVD SUI	TE 400	
(Street Address of I		0.	(Marling Addr		
VEST CHESTER, PA	. 19382		WEST CHESTER, PA 193	82	
Name:	1st UNITED CRS, LLC				
Office Address:	4583-A CAPITAL CIRCLE NW				
Office Address:	4583-A CAPITAL CIRCLE NW TALLAHASSEE		Florida 32303		
istered agent's accep ing been named as re	TALLAHASSEE (City) otance: egistered agent and to accept service of			liability co	
istered agent's accep ing been named as re gnated in this applica omply with the provise	TALLAHASSEE ctance: egistered agent and to accept service of the appointment tions of all statutes relative to the propess of my position as registered agent.	ns register and co	(Zip code for the above stated limited ered agent and agree to act	liability co in this cap	acity. I further
istered agent's acceping been named as regnated in this applicationally with the provise accept the obligation.	TALLAHASSEE (City) Intance: Registered agent and to accept service of the appointment of all statutes relative to the propers of my position as registered agent. (Registered agent)	is register and co	(Zip code for the above stated limited ered agent and agree to act i mplete performance of my d	liability co in this cap	oacity. I further I I am familiar w
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istered agent's accepting been named as regnated in this applicationally with the provise accept the obligation. The name, title of capa Title or Capacity:	TALLAHASSEE (City) Itance: registered agent and to accept service of the appointment of the appointment of the statutes relative to the property of my position as registered agent. (Registered agent) acity and address of the person(s) who have and Address: CHADD INGRAM 16 HAGERTY BLVD SUIT WEST CHESTER, PA 1938:	as/have:	(Zip code) for the above stated limited ered agent and agree to act amplete performance of my and agree is/are:	liability coin this cap duties, and Name a	nacity. I further
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Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the risdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath the translator must be submitted)

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information imitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF STATE

10/06/2017

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

IES CONSTRUCTION LLC

is duly registered as a Pennsylvania Limited Liability Company under the laws of the Commonwealth of Pennsylvania and remains subsisting so far as the records of this office show, as of the date herein.

I DO FURTHER CERTIFY THAT this Subsistence Certificate shall not imply that all fees, taxes and penalties owed to the Commonwealth of Pennsylvania are paid.

OF THE COAMON OF

IN TESTIMONY WHEREOF, I have hereunto set my hand and caused the Seal of the Secretary's Office to be affixed, the day and year above written

Secretary of the Commonwealth

Certification Number: TSC171006110622-1

Verify this certificate online at http://www.corporations.pa.gov/orders/verify