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COVER LETTER

Registration Section Division of Corporations

TO:

SUBJECT:	PPI ENGINEERING	& CONSTRUCTION SER	VICES, LLC			
SOBJECT.		Name of L	imited Liability (Company		
The enclosed Existence, a	d "Application by Fore nd check are submitted	eign Limited Liability Compa I to register the above refere	any for Authoriza nced foreign limit	tion to Trai ed liability	nsact Business in Florida, company to transact busin	' Certificate of ness in Florida.
Please return	n all correspondence co	oncerning this matter to the f	ollowing:			
	RONALD D. TI	HOMAS				
	•	Na	me of Person			
	PPI ENGINEER	ING & CONSTRUCTION	SERVICES, LLC	·		
		Fir	nı/Company			
	2627 CHESTNU	FT RIDGE RD, STE 240				
			Address			,
	KINGWOOD, T	`X 77339				
		City/Sta	ate and Zip Code			
	RON.THOMAS@	PPICONSTRUCTION.NET	Γ			
		E-mail address: (to be used	for future annual	report noti	fication)	
For further i	nformation concerning	this matter, please call:				
RC	NALD D. THOMAS		832 at (844-121	2	
	Name of	Contact Person	Area Code	Dayt	ime Telephone Number	
Div Reg P.C	AILING ADDRESS: vision of Corporations gistration Section D. Box 6327 dahassee, FL 32314			Division of Registration Clifton Bu 2661 Exec	ADDRESS: of Corporations on Section oilding cutive Center Circle ee, FL 32301	
	a check for the followi \$125.00 Filing Fee	ng amount: \$\Bigsirem\$ \$\\$130.00 \text{ Filing Fee & Certificate of Status}	S155.00 Filin 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

IN COMPILANCE WITH SECTION 605.0002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED HABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

it name unavantante, enter atternate i	name adopted for the purpose of transacting business in Florida	a. The alternate name must include "Limited	Liability Company," "L.L.C," or "LLC,")			
STATE OF TEXAS		3. 26-2429453				
(Jurisdiction under the law of w	hich foreign limited liability company is organized)		umber, if applicable)			
N/A						
	(Dute first transacted business in Florida, if prior to reg (See sections 605 0904 & 605,0905, F.S. to determine	astration) penalty liability)				
2627 CHESTNUT RII		6. 2627 CHESTNUT RIDO				
(Smeet Address of SUITE 240	Principal Office)	(Mailing /	(ddress)			
KINGWOOD, TX 773	39	KINGWOOD, TX 77339				
7. Name and street addre	ss of Florida registered agent: (P.O. Box 1	<u>NOT</u> acceptable)				
Name:	RONALD D. THOMAS					
Office Address:	2627 CHESTNUT RIDGE ROAD, SUITE 240					
	KINGWOOD	, Florida 77339				
Having been named as re lesignated in this applica o comply with the provis	rgistered agent and to accept service of pro tion, I hereby accept the appointment as i ions of all statutes relative to the proper a	registered agent and agree to a	ict in this capacity. I further ag			
Having been named as red designated in this applica- to comply with the provis- and accept the obligation	rgistered agent and to accept service of protein. I hereby accept the appointment as it ions of all statutes relative to the proper as s of my position as registered agent. (Registered agent's significant contents of the proper acceptance of the	registered agent and agree to a nd complete performance of n	nct in this capacity. I further agony duties, and I am familiar with			
designated in this applicate comply with the provisuand accept the obligation 8. The name, title or cap	registered agent and to accept service of protein. I hereby accept the appointment as a sions of all statutes relative to the proper as s of my position as registered agent. (Registered agent's signative and address of the person(s) who has	registered agent and agree to a nd complete performance of n	nct in this capacity. I further ago ny duties, and I am familiar with 			
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Having been named as relesignated in this applicate to comply with the provisund accept the obligation 8. The name, title or cap Title or Capacity:	registered agent and to accept service of protein. I hereby accept the appointment as a sions of all statutes relative to the proper as s of my position as registered agent. (Registered agent's signature and Address: RONALD D. THOMAS 2627 CHESTNUT RIDGE RD	negistered agent and agree to a nd complete performance of n nature) have authority to manage is/are Title or Capacity:	ect in this capacity. I further aging duties, and I am familiar with E: Name and Address: RICHARD BROCATO 2627 CHESTNUT RIDGE			
Having been named as relesignated in this applicated in this applicated comply with the provisuand accept the obligation 8. The name, title or cap Title or Capacity: CEO	egistered agent and to accept service of protein. I hereby accept the appointment as a sions of all statutes relative to the proper as s of my position as registered agent. Registered agent's signacity and address of the person(s) who has a Name and Address: RONALD D. THOMAS 2627 CHESTNUT RIDGE RD KINGWOOD, TX 77339	negistered agent and agree to a nd complete performance of n nature) have authority to manage is/are Title or Capacity:	ect in this capacity. I further aging duties, and I am familiar with E: Name and Address: RICHARD BROCATO 2627 CHESTNUT RIDGE			
Having been named as relesignated in this applicate of comply with the provisual accept the obligation 8. The name, title or cap Title or Capacity: CEO PRESIDENT	registered agent and to accept service of protein. I hereby accept the appointment as a sign of all statutes relative to the proper as so f my position as registered agent. Registered agent's sign acity and address of the person(s) who has acity and address of the person(s) who has acity and address: RONALD D. THOMAS 2627 CHESTNUT RIDGE RD KINGWOOD, TX 77339 TOMMY WILLIAMSON 2627 CHESTNUT RIDGE RD KINGWOOD, TX 77339	negistered agent and agree to a nd complete performance of n nature) have authority to manage is/are Title or Capacity:	et in this capacity. I further ag ny duties, and I am familiar with E: Name and Address: RICHARD BROCATO 2627 CHESTNUT RIDGE			
Having been named as redesignated in this applicate to comply with the provisuand accept the obligation 8. The name, title or cap Title or Capacity: CEO PRESIDENT (Use attachments if neces) 9. Attached is a certificate	registered agent and to accept service of protein. I hereby accept the appointment as a sions of all statutes relative to the proper as sof my position as registered agent. Registered agent's signacity and address of the person(s) who has acity and address of the person(s) who has acity and address: RONALD D. THOMAS 2627 CHESTNUT RIDGE RD KINGWOOD, TX 77339 TOMMY WILLIAMSON 2627 CHESTNUT RIDGE RD KINGWOOD, TX 77339 reserved.	nature) have authority to manage is/are Title or Capacity: VP/GEN MANAGE!	e: Name and Address: RICHARD BROCATO 2627 CHESTNUT RIDGE KINGWOOD, TX 77339 having custody of records in the			

Typed or printed name of signee

Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for PPI Engineering & Construction Services, LLC (file number 800965717), a Domestic Limited Liability Company (LLC), was filed in this office on April 16, 2008

It is further certified that the entity status in Texas is in existence.

It is further certified that our records indicate CAPITOL CORPORATE SERVICES, INC. as the designated registered agent for the above named entity and the designated registered office for said entity is as follows:

206 E 9TH ST., SUITE 1300

AUSTIN, TX - 78701 USA

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on November 02, 2017.





Rolando B. Pablos Secretary of State

TID: 10268

Dial: 7-1-1 for Relay Services Document: 770592030005