# MBCCCC264

(Requestor's Name)					
(Address)					
(Address)					
	(City/State/Zip/Phone #)				
PICK-UF	P WAIT MAIL				
(Business Entity Name)					
(Document Number)					
Certified Copies	Certificates of Status				
Special Instructions to Filing Officer:					

Office Use Only



000309903030

18 KM -6 PH 4: 21

3/2/10/05

CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 083561 7704613

AUTHORIZATION: Oppullation

COST LIMIT : \$ 125.00

ORDER DATE: February 23, 2018

ORDER TIME: 2:34 PM

ORDER NO. : 083561-005

CUSTOMER NO: 7704613

#### FOREIGN FILINGS

NAME: CAVEMAN CONSTRUCTION LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

XX PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Roxanne Turner -- EXT# 62969

EXAMINER:

#### COVER LETTER

TO:

Registration Section

Div	ision of Corporatio	ns								
SUBJECT:	Caveman Construc									
		Name of Limited Liability Company								
		reign Limited Liability Com ed to register the above refer								
Please return	all correspondence	concerning this matter to the	following:							
	James Wagner	r								
	Name of Person									
	Caveman Con	struction LLC								
	<del></del>	ĮF	irm/Company							
	721 CHARLE	STOWN CIRCLE								
			Address							
	PALM BEAC	H GARDENS, FL 33410								
		City/S	State and Zip Code	:						
	mmengini@gm	ail.com								
		E-mail address: (to be use	d for future annua	l report noti	fication)					
For further in	nformation concerni	ng this matter, please call:								
Me	organ Mengini		610 at (	304-603 ) Dayt	9	Number WA				
	Name	of Contact Person	Area Code	Dayt	ime Telephone	Number 3	1 ]			
Div Reg P.O Tal	AILING ADDRESS rision of Corporation gistration Section b. Box 6327 lahassee, FL 32314	s		Division o Registratio Clifton Bu 2661 Exec		28 C OF				
	a check for the follov \$125.00 Filing Fee	ving amount: ☐ \$130.00 Filing Fee & Certificate of Status	S155.00 Fili Certified Copy	•	□ \$160.00 Fi of Status & C		ificate			

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

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTEX THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED HABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. Caveman Construction	LLC	I Liability Company ""   [ C " or " ] [ C "	<u> </u>			
_	NSTRUCTION MANAGEMENT I		,			
(If name unavailable, enter alternate	name adopted for the purpose of transacting business in Flor	rida. The alternate name must include "Limited Lia	ability Company;" "L.L.C," or "LLC.")			
2. Delaware		3. 11-3789251	<del> </del>			
(Jurisdiction under the law of w	hich foreign limited liability company is organized)	(FEI num	ber, if applicable)			
4			<del></del>			
	(Date first transacted business in Florida, if prior to to (See sections 605 0904 & 605,0905, F.S. to determine					
5. 2800 N KENT RD		6. 2800 N KENT RD				
(Street Address of Principal Office) Broomall, PA 19008		(Mailing Address) Broomall, PA 19008				
		<del> </del>	·			
7. Name and street addre	ss of Florida registered agent: (P.O. Box	NOT acceptable)				
Name:	James Wagner	*·- <del></del>				
Office Address:	721 CHARLESTOWN CIRCLE					
	PALM BEACH GARDENS					
	(City)	, Florida 33410 (Zip cos	ic)			
	ions of all statutes relative to the proper is of my position as registered agent.  By:		<u>~ ₹</u>			
	(Registered agent's states Wagner 2-23-18	signature)	- T			
	acity and address of the person(s) who ha		7.5			
Title or Capacity:	Name and Address:	Title or Capacity:	Name and Address:			
MBR	James Wagner	MBR	Gilbert Hanse			
	721 CHARLESTOWN CIR PALM BEACH GARDENS, I	FL, 33410	9 TIBURON LANE \ MALVERN_DA 19355			
		-	200 <b>(</b> 5)			
		<u> </u>	**			
		-				
(Use attachments if neces	scary)	<del>-</del>				
	•					
	of existence, no more than 90 days old, of which it is organized. (If the certificate					
of the translator must be s	<del>-</del>	e io in a foreign language, a numba	non or the commone under out			
10 This document is exec	cuted in accordage with section 605.0203	S (1) (b) Florida Statutes Lam ausa	re that any false information			
	o the Department of State constitutes a thi					
	h					
	Signature	of an authorized person	<del></del>			
	Irran Wannar 2 22 19					
	James Wagner 2-23-18 Typed or	printed name of signee				

Page 1

## Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "CAVEMAN CONSTRUCTION, LLC" IS DULY

FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD

STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS

OFFICE SHOW, AS OF THE TWENTY-THIRD DAY OF FEBRUARY, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CAVEMAN CONSTRUCTION, LLC" WAS FORMED ON THE FIFTH DAY OF SEPTEMBER, A.D. 2006.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

7018 MAR -b △ 9 51

Authentication: 202206046

Date: 02-23-18