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Certified Copies	Cortificates	of Status
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COVER LETTER

TO:		on Section f Corporations	i						
SUBJE		ry Plumbing &							
			Name of L	imited Liability (Company				
The end Existen	closed "Appl ice, and chec	lication by Fore k are submitted	ign Limited Liability Comp to register the above refere	any for Authoriza	tion to Trans ted liability of	act Business ompany to tra	in Floric insact bi	la," Cer isiness	tificate of in Florida
Please	return all con	respondence co	oncerning this matter to the	following:					
	N	lichael Wood	•						
	_		Na	me of Person					
	V	ictory Plumbin	g & Gas LLC						
	_		Fir	m/Company					
	7	5 Red Bud Lan	e #405					2018	gar night thing
	_			Address			D.E.	HAR	in terms
	I ₁	nlet, FL 32461					SSE SSE	30	
			City/St	ate and Zip Code			黑黑	\triangleright	G
	vic	tory.plumbing@	2yahoo.com				FLOW	Ģ %	
			E-mail address: (to be used	for future annual	report notific	cation)).~		
For fur	ther informat	tion concerning	this matter, please call:						
	Michael W	/ood		205 _ at (381-0056				
		Name of	Contact Person	Area Code	Daytin	ne Telephone	Numbe	r	
	Division o Registration P.O. Box 6				Registration Clifton Buil	Corporations Section ding tive Center C			
Enclose		for the following Filing Fee	ng amount: □ \$130.00 Filing Fee & Certificate of Status	□ \$155.00 Filin Certified Copy		□ \$160.00 Fi of Status & C			icate

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:

(If name unavailable, enter altern	ate name adopted for th	he purpose of transacting business in	Florida The alternate r	ame must include "Limited Liabil	lity Company," "L.L.	C," or "LLC.")	
2. Alabama			3. 81-4				
	of which foreign limited	d liability company is organized)	J		r, if applicable)		
4. None							
	(Date first to (See section	ransacted business in Florida, if priors 605.0904 & 605.0905, F.S. to dete	r to registration.) ermine penalty liability)				
5. Michael Wood			6. Mich	ael Wood			
(Street Addres 75 Red Bud Lane #	s of Principal Office)		75 Re	(Mailing Addresed Bud Lane #405	S5)		
Inlet, FL 32461		Inlet, FL 32461					
							
7. Name and street add	<u>tress</u> of Florida	registered agent: (P.O. B	ox <u>NOT</u> accept	able)			
Name:	Michael W	ood .					
	75 Red Bud	d Lane #405		-		men garij	
Office Addres		a Laite ii 103	<u> </u>	-			
	Inlet	(City)		_, Florida 32461 (Zip code)	<u></u>	-	
Registered agent's ac	centance:	(City)		(Zip code)	, EE-C	,	
and accept the obligat	ions of my posit	tion as registered ogent.	()	e performance of my d	5 6	<u>J</u>	
. 0	M.	tion as registered agent. (Registered agen	nt's signature)			<u>J</u>	
. 0	eapacity and add	tion as registered ogent.	nt's signature) has/have author			3	
8. The name, title or o	capacity and add	(Registered agent. (Registered agent) dress of the person(s) who dame and Address:	nt's signature) has/have author	ity to manage is/are:	——————————————————————————————————————	3	
8. The name, title or o	capacity and add M 75	(Registered agent.) (Registered agent) (Registered agent) (Registered agent) (Registered agent) (Registered agent)	nt's signature) has/have author	ity to manage is/are:	——————————————————————————————————————	3	
8. The name, title or o	capacity and add M 75	Registered agent. (Registered agent) (Registered ag	nt's signature) has/have author	ity to manage is/are:	——————————————————————————————————————	2	
8. The name, title or of Title or Capacity Owner	capacity and add Mi 75	Registered agent. (Registered agent) (Registered ag	nt's signature) has/have author	ity to manage is/are:	——————————————————————————————————————	3	
8. The name, title or of Title or Capacity Owner (Use attachments if new 9. Attached is a certification under the 1	capacity and add Moreovery and add Moreovery and add 75 Interpretation of the control of the	Registered agent. (Registered agent) (Registered ag	has/have author Title or	ity to manage is/are: Capacity: eated by the official have	Name and A	ddress:	
8. The name, title or of Title or Capacity Owner (Use attachments if need a certific jurisdiction under the lof the translator must be	capacity and add Mi 75 Int cessary) cate of existence aw of which it is the submitted)	dress of the person(s) who dame and Address: ichael Wood 5 Red Bud Lane #405 let, FL 32461	has/have author Title or	ity to manage is/are: Capacity: atted by the official haven language, a translation	Name and A	ddress: Trecords in the licate under oath	
8. The name, title or of Title or Capacity Owner (Use attachments if need a certific jurisdiction under the lof the translator must be	capacity and add Mi 75 Int cessary) cate of existence aw of which it is the submitted)	Registered agent. (Registered agent. (Regist	has/have author Title or	eated by the official haven language, a translation da Statutes. I am aware ony as provided for in s.	Name and A	ddress: Trecords in the licate under oath	
8. The name, title or of Title or Capacity Owner (Use attachments if need a certific jurisdiction under the lof the translator must be	capacity and add Mi 75 Int cessary) cate of existence aw of which it is the submitted)	Registered agent. (Registered agent. (Regist	tra signature) has/have author Title or d, duly authentic cate is in a foreign 203 (1) (b) Florithird degree felo	eated by the official haven language, a translation da Statutes. I am aware ony as provided for in s.	Name and A	ddress: Trecords in the licate under oath	

John H. Merrill Secretary of State P.O. Box 5616 Montgomery, AL 36103-5616

STATE OF ALABAMA

I, John H. Merrill, Secretary of State of Alabama, having custody of the Great and Principal Seal of said State, do hereby certify that

the entity records on file in this office disclose that Victory Plumbing & Gas LLC was formed in Shelby County, Alabama on January 17, 2017. The Alabama Entity Identification number for this entity is 381-807. I further certify that the records do not disclose that said entity has been dissolved, cancelled or terminated.

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In Testimony Whereof, I have hereunto set my hand and affixed the Great Seal of the State, at the Capitol, in the city of Montgomery, on this day.

03/08/2018

Date

X 74. Merill

John H. Merrill

Secretary of State