

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

Office Use Only



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04/27/18--01007--006 **125.00



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SUNSHINE CORPORATE FILING OF FLORIDA INC.

3458 Lakeshore Drive, Tallahassee, Florida 32312 (850) 656-4724

DATE 4/27/20	018 ₩WALK I P
ENTITY NAME_	BLACKCOMB CONSTRUCTION GROUP, LLC
DOCUMENT NUN	1BER
	PLEASE FILE THE ATTACHED AND RETURN
xxxxx	Plain Copy
	Certificate of Status
	PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY Certified Copy of Arts & Amendments Certificate of Good Standing
	APOSTILLE' / NOTARIAL CERTIFICATION
COUNTRY OF DES NUMBER OF CER	STINATION
TOTAL OWED_	\$125 CHECK # 4789
Please call Tin	a at the above number for any issues or concerns. Thank you so much!

COVER LETTER

TO: Registration Section

Div	vision of Corporatio	ns						
	Blackcomb Constr	uction Group, LLC						
SUBJECT:		Name of Limited Liability Company						
The enclosed Existence, as	d "Application by Fo nd check are submitt	reign Limited Liability Com ed to register the above refer	pany for Authorization to enced foreign limited lia	o Transact Business in Florida," Certificate of bility company to transact business in Florida				
Please return	n all correspondence	concerning this matter to the	following:					
		N	ame of Person					
	Harbor Compl		auto or r croon					
	Firm/Company							
	48-50 W. Che	stnut St., Suite 301						
			Address					
	Lancaster, PA	17603						
	irene lavelle@h	City/S tackcombgroup.com	tate and Zip Code					
		E-mail address: (to be use	d for future annual repor	t notification)				
For further in	nformation concernis	ng this matter, please call:		·				
Ha	rbor Compliance		-	3-9137				
	Name	of Contact Person	at () Area Code	Daytime Telephone Number				
Div Reg P.O	AILING ADDRESS: vision of Corporation gistration Section D. Box 6327 lahassee, FL 32314		Divis Regi Clift 2661	EET ADDRESS: sion of Corporations stration Section on Building Executive Center Circle thassee, FL 32301				
	a check for the follov \$125.00 Filing Fee	ving amount: ☐ \$130.00 Filing Fee & Certificate of Status	□ \$155.00 Filing Fee Certified Copy	& □ \$160.00 Filing Fee, Certificate of Status & Certified Copy				

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

IN COMPLIANCE WITH SECTION 605(1)(1)2, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED HABILITY COMPANYTO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

Blackcomb Construction	on Group, LLC		
(Name of Fore	ign Limited Liability Company: must include "	Limited Liability Company," "L.L.C.," or	"LLC.")
Liability Company," "L.L.C,			ne must include "Limited
2. Ohio	-3.	-1153649	
(Jurisdiction under the law company is organized)	of which foreign limited liability	(FEI number, it applicable)
4	(Date first transacted business in Florid	la. if prior to registration.)	_
	(See sections 605.0904 & 605.0905, F.S.	to determine penalty liability)	بب
5. 1850 Columbus Rd, C	leveland, OH 44113		- 元 6 - 元 6
			大器 五 二
	(Street Address of Principal O	flice)	- 144 2 T
6. 1850 Columbus Rd, Cl	·		- []
b			
	(Mailing Address)		_ 0
	· · · · · ·		
Name and <u>street addres</u>	is of Florida registered agent: (P.O. Box N	<u>(OT</u> acceptable)	
Name:	REGISTERED AGENTS INC		
Office Address:	3030 N. ROCKY POINT DRIVE, STE I	50A	
	ТАМРА	. Florida 33607	
	(City)	(Zip code)	
designated in this applica to complywith the provision	gistered agent and to accept service of protion, I hereby accept the appointment as roons of all statutes relative to the proper an my position as registered agent.	egistered agent and agree to act in th	is capacity. I further agree
	(Registered agent	s signature)	-
8. The name, title or capa	icity and address of the person(s) who has/h	nave authority to manage is/are:	
	er. 3100 Coleridge Road, Cleveland Heigh		
	Telego		
9. Attached is a certificate jurisdiction under the law of the translator must be su	of existence, no more than 90 days old, dul of which it is organized. (If the certificate is abmitted)	s in a foreign language, a translation o	custody of records in the f the certificate under oath
This document is executed	in accordance with section 605.0203 (1) (b). Florida Statutes. Lam aware that an	v false information
submitted in a document to	the Department of State constitutes a third	degree felony as provided for in s.817	1.155, F.S.
	Michael Whitticar		

Typed or printed name of signee

UNITED STATES OF AMERICA STATE OF OHIO OFFICE OF THE SECRETARY OF STATE

I, Jon Husted, do hereby certify that I am the duly elected, qualified and present acting Secretary of State for the State of Ohio, and as such have custody of the records of Ohio and Foreign business entities; that said records show BLACKCOMB CONSTRUCTION GROUP, LLC, an Ohio For Profit Limited Liability Company, Registration Number 2304860, was organized within the State of Ohio on June 19, 2014, is currently in FULL FORCE AND EFFECT upon the records of this office.



Witness my hand and the seal of the Secretary of State at Columbus, Ohio this 27th day of April, A.D. 2018.

Ohio Secretary of State

Jon Hastel

Validation Number: 201811700470