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PICK-UP	☐ WAIT	MAIL
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FILED 2018 AUG 13 AM 11: 27 SECRETARY OF STATE SECRETARSSEE, FLORIDA

N CULLIGAN' AUG 1 7 2018 TO:

Registration Section **Division of Corporations**

Moran Construction Consultants, LLC

Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Bartley J Crochet			
Name of Person			
Moran Construction Consultants, LLC			
Firm/Company			
601 Saint Charles St.			
Address			
Baton Rouge, LA 70802			
City/State and Zip Code			
ap@morancc.com			

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Bart Crochet

Name of Contact Person

MAILING ADDRESS:

Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314

STREET ADDRESS:

Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Enclosed is a check for the following amount:

□ \$125.00 Filing Fee

☑ \$130.00 Filing Fee & Certificate of Status

□ \$155.00 Filing Fee & Certified Copy

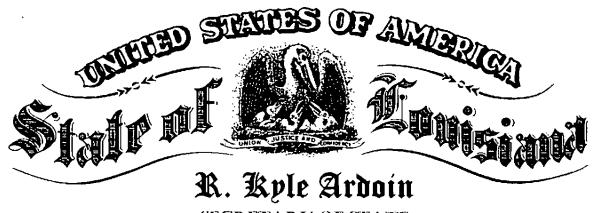
□ \$160.00 Filing Fee, Certificate of Status & Certified Copy

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

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANYTO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

(If name unavailable, enter alternate	name adopted for the purpose of transacting business in	n Florida. The alternate name must include "Limited Li	tability Company," "L.L.C." or "LLC.")
2 Louisiana	,	3 20-1830903	
-	hich foreign limited liability company is organized)		inher, if applicable)
4.			
	(Date first transacted business in Florida, if pric (See sections 605 0904 & 605 0905, F.S. to det	or to registration.) termine penalty hability)	
	on Consultants, LLC	6. Moran Construction	Consultants, LLC
(Street Address of 1528 Hwy 10	Principal (Office)	(Mailing Ad 601 Saint Charles St	
Greensburg, LA 7	0441	Baton Rouge, LA 70	802 AS 2
	ss of Florida registered agent; (P.O. E	30x NOT acceptable)	CRETAR LAHAS
Name:	Registered Agents Inc.		3 3 P
Office Address:	3030 N. Rocky Point Dr. STI	E 150A	ANII: 2
	Tampa	Florida 33607	OR 1: 2
	egistered agent and to accept service		
Having been named as r designated in this applica- to comply with the provis	egistered agent and to accept service ttion, I hereby accept the appointmen ions of all statutes relative to the pro- is of my position as registered agent.	it as registered agent and agree to ac per and complete performance of my	ct in this capacity. I further ag
Having been named as r designated in this applice to comply with the provis and accept the obligation	egistered agent and to accept service ttion, I hereby accept the appointmen ions of all statutes relative to the pro- is of my position as registered agent. Registered agent	nt as registered agent and agree to ac per and complete performance of my int's signature)	et in this capacity. I further ag y duties, and I am familiar wil
Having been named as r designated in this applice to comply with the provis and accept the obligation	egistered agent and to accept service ttion, I hereby accept the appointmen ions of all statutes relative to the pro- is of my position as registered agent.	nt as registered agent and agree to ac per and complete performance of my int's signature)	et in this capacity. I further ag y duties, and I am familiar wil
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Having been named as r designated in this applicate to comply with the provisand accept the obligation 8. The name, title or capatitle or Capacity: Member Member	egistered agent and to accept service ation. I hereby accept the appointmentions of all statutes relative to the project of my position as registered agent. (Registered agent active and address of the person(s) who Name and Address: John Moran 1276 Carolyn Sue Dr. Baton Rouge, LA 70815 Fred Moran 1528 Hwy 10 Greensburg, LA 70441	at as registered agent and agree to ac per and complete performance of my cat's signature) has/have authority to manage is/are: Title or Capacity: Officer	et in this capacity. I further ag y duties, and I am familiar wil
Having been named as r designated in this applicate to comply with the provisand accept the obligation. 8. The name, title or capacity: Member Member (Use attachments if nece	egistered agent and to accept service ation. I hereby accept the appointmentions of all statutes relative to the project of my position as registered agent. Registered agent (Registered agent) (Registered agent) (Registered agent) (Registered agent) Address: John Moran 1276 Carolyn Sue Dr. Baton Rouge, LA 70815 Fred Moran 1528 Hwy 10 Greensburg, LA 70441 Ssary) of existence, no more than 90 days of of which it is organized. (If the certifications)	at as registered agent and agree to ac per and complete performance of my matrix signature) Title or Capacity: Officer Officer Officer	Name and Address: Same and Address: having custody of records in the ation of the certificate under or

Typed or printed name of signee



SECRETARY OF STATE

As Secretary of State, of the State of Louisiana, I do hereby Certify that

the Articles of Organization of

MORAN CONSTRUCTION CONSULTANTS, LLC

Domiciled at GREENSBURG, LOUISIANA,

Were filed in this Office and a Certificate of Organization was issued on November 05, 2004,

I further certify that no Certificate of Dissolution or Termination has been issued.

In testimony whereof, I have hereunto set my hand and caused the Seal of my Office to be affixed at the City of Baton Rouge on,

August 8, 2018

R 12fe No. Secretary of State

Web 35808819K



Certificate ID: 10982492#JUL73

To validate this certificate, visit the following web site, go to Business Services, Search for Louisiana Business Filings, Validate a Certificate, then follow the instructions displayed.

www.sos.la.gov