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## **COVER LETTER**

TO:

Registration Section

Division of Co	rporations				
SUBJECT: <u>CCI Ge</u>	neral Contractors, LLC			_	
	Name of I	Limited Liability Company			
	on by Foreign Limited Liability Comp submitted to register the above refere				
Please return all corresp	ondence concerning this matter to the	following:			
S	herri Roberts		· · · · ·	<b></b> -	
CC	I General Contractors, LLC	rm/Company	<del></del>	_	
11	1 W 16th Ave, STE 201	Address		_	
A	nchorage, AK 99501	ate and Zip Code		_	
ta	xak@bbssllc.com	·			
For further information	E-mail address: (to be used concerning this matter, please call:	for future annual report not	ification) ACCRAHA	2010 SEP 10	T
Sherri Ro	oberts	at ( 907 ) 793-9		·	- इन्स्ट्रेस्ट्र 
	Name of Contact Person	Area Code Day	time Telephone Number	- 3	
MAILING AI Division of Co Registration Se P.O. Box 6327 Tallahassee, FI	porations ction	STREET Division Registrat Clifton B 2661 Exe	of Corporations ion Section	2: 86	
Enclosed is a check for □ \$125.00 Fili		☐ \$155.00 Filing Fee & Certified Copy	S160.00 Filing Fee, of Status & Certified C		te

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

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: CCI General Contractors, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") Alaska (Jurisdiction under the law of which foreign limited hability company is organized) (FEI number, if applicable) 9/4/2018 (Date first transacted business in Flonda, if prior to registration.) (See sections 605 0904 & 605.0905, F.S. to determine penalty liability.) 111 W 16th Ave, STE 201 (Street Address of Principal Office) Anchorage, AK 99501 Anchorage, AK 99501 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) CT Corporation Systems Name: 1200 South Pine Island Road Office Address: Plantation \_ , Florida \_33324 Registered agent's acceptance: Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent. James M. Halpin Tames . W. Halpin Assistant Secretary (Registered agent's signature) 8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: Title or Capacity: Name and Address: Title or Capacity: Name and Address: President John Duncan Morrison 111 W 16th Ave, STE 400 Anchorage, AK 99501 (Use attachments if necessary) 9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

10. This document is executed in accordance with section 605.0203 (1) (b). Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Sherri Roberts

Signature of an auditorized person



No information is available in this office on the financial condition, business activity or practices of this corporation.



IN TESTIMONY WHEREOF, I execute the certificate and affix the Great Seal of the State of Alaska effective **September 05, 2018**.

Mike Navarre Commissioner

Wile Marone