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(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

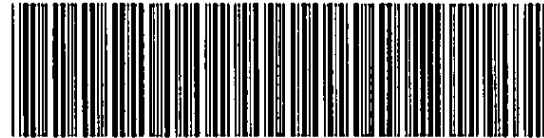
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FILED
JAN 8 2019
MICHIGAN
CLERK OF COURT
JAN 8 2019

N. CAUSSEAU

JAN 8 2019



March 14, 2016

Division of Corporations
Registration Section
PO Box 6327
Tallahassee FL 32314

RE: Masterpiece Contracting LLC

To whom it may concern:

Enclosed are One (1) original and One (1) copy of the Application by Foreign Limited Liability Company for Authorization to transact Business in Florida. A check in the amount of \$155 for the filing fee and certified copy.

Once filed, please email to Danielle@sageintl.com and return in the enclosed self-addressed envelope to:

Attn Danielle Henriksen
Sage International, Inc.
1135 Terminal Way Ste 209
Reno NV 89502

We appreciate your prompt attention to this matter. If you have any questions, please contact me by phone.

Thank you,

A handwritten signature in cursive script that reads "Danielle Henriksen".

Danielle Henriksen
Business Support Specialist

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Masterpiece Contracting 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:

Danielle Henriksen

Name of Person

Sage International, Inc.

Firm/Company

1135 Terminal Way Ste 209

Address

Reno NV 89502

City/State and Zip Code

danielle@sageintl.com

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

For further information concerning this matter, please call:

Danielle Henriksen

775

786-5515

Name of Contact Person

at (_____) _____

Area Code

Daytime Telephone Number

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 COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. Masterpiece Contracting LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C.," or "LLC.")

2. Nevada
(Jurisdiction under the law of which foreign limited liability company is organized)

3. _____
(FEI number, if applicable)

4. _____
(Date first transacted business in Florida, if prior to registration)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 1135 Terminal Way Ste 209
(Street Address of Principal Office)

6. PO Box 1311
(Mailing Address)

Reno NV 89502
Lynn Haven FL 32444

RECEIVED
SEP 26 2006
11:16 AM

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Business Filings Incorporated

Office Address: 1200 South Pine Island Rd

Plantation 33324
(City) Florida (Zip code)

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.

Breana Rutter, Asst Secretary for Business Filings Incorporated
(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:

Manager

Michael Rhodes

PO Box 1311

Lynn Haven FL 32444

(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.

Michael Rhodes

Signature of an authorized person

Michael Rhodes

Typed or printed name of signer

9:44
DEC 25

10

SECRETARY OF STATE



FILED
DEC 26 AM 9:41
CLERK OF COURT

CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, Barbara K. Cegavske, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **MASTERPIECE CONTRACTING LLC**, as a limited liability company duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since December 13, 2018, and is in good standing in this state.



IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on December 19, 2018.

Barbara K. Cegavske

Barbara K. Cegavske
Secretary of State

Electronic Certificate
Certificate Number: C20181219-0573