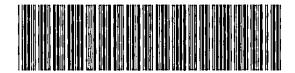
## M1900003484

(Requestor's Name)
,
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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D. BRUCE APR 1 1 2019



March 30, 2019

CHASE CHILDERS OR HARTFORD HAFFENREFFER 303 ELDRIDGE STREET CLEARWATER, FL 33755-3804

SUBJECT: SUPERIOR CONTRACTING & CONSTRUCTION, L.L.C.

Ref. Number: W19000032367

We have received your document for SUPERIOR CONTRACTING & CONSTRUCTION, L.L.C. and your check(s) totaling \$160.00. However, the document has not been filed and is being retained in this office for the following:

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6842.

Deborah Bruce Corporate Records Supervisor II

Letter Number: 519A00006354

## **COVER LETTER**

TO:

Registration Section

Div	vision of Corporations										
SUBJECT:	Superior Contracting & Construction. L.L.C.										
	Name of Limited Liability Company										
	d "Application by Foreign Limited Liability Comp nd check are submitted to register the above refere										
Please return	n all correspondence concerning this matter to the	following:									
	Chase Childers or Hartford Haffenreffer										
	Na	ame of Person	<del></del>								
	Superior Contracting & Construction, L.L.C	3.									
	Firm/Company										
	303 Eldridge Street										
		Address									
	Clearwater, Florida 33755-3804										
	City/Si	tate and Zip Code			2019						
	superioreelle@gmail.com				y APR						
	E-mail address: (to be used	for future annual	report notification)	3.55 3.55 3.55 3.55 3.55 3.55 3.55 3.55	<b>70</b>	COLUMN TO					
For further i	nformation concerning this matter, please call:			SEA FEA	<b>P</b> *	m					
Da	ive, Hartford, Chase	727 at (	248.8899	FLOR	H 1: 34						
	Name of Contact Person	Area Code	Daytime Telephone Num	ber 🗔	34						
Div Reg P.C	AILING ADDRESS: vision of Corporations gistration Section D. Box 6327 llahassee, FL 32314		STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301								
	closed is a check for the following amount: ase make check payable to: FLORIDA DEPART \$125.00 Filing Fee \$\sum_{\text{Certificate of Start}}\$	: 🔲 \$155.00									

## 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 HABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

f name unavailable, enter alternate n	ame adopted for the purpose of transacting business in Flo	orida The alter	mate name must inch	ide "Limited Liability C	ompany," "L.L.	.C," or "L	I.C.")
Delaware 2.		83-3351486 3					
(Jurisdiction under the law of which foreign limited liability company is organized)				(FEI number, if a	pplicable)		
	Awaiting registration approval						
	(Date first transacted business in Florida, if prior to (See sections 605,0904 & 605,0905, F.S. to determ	registration) ine penalty hal	bility)		_		
303 Eldridge Street			03 Eldridge S	(Mailing Address)			
(Street Address of Principal Office)		_		(Mailing Address)			_
Clearwater, Florida 33	755-3804	C	Clearwater, Flo	rida 33755-3804			
727.248.8899	7.248.8899		05.321.7869				
. Name and street address of Florida registered agent: (P.O. Box			ceptable)		SECTION SECTION	2019 APR	¢8
Name:	Hartford Haffenreffer				ASSER ASSER		<i>F</i>
Office Address:	215 North Missouri Avenue				or s fa er Lon		į.
	Clearwater		, Florida	33755		34	
	(City)			(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.

(Registered agent's signature)

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]: Title or Capacity: Name and Address: Title or Capacity: Name and Address: Hartford Haffenreffer Name: Name: James Erland Newman Manager Manager Manager Address: \_\_\_ 1713 Long Street 215 N Missouri Avenue Address: ■ Member Member Clearwater, Florida Clearwater, Florida 33755 Authorized Authorized Person Person Other\_\_\_\_ Other Other Other\_\_\_ Name: \_ Chase Childers Dave Childers Manager Name: Manager Manager Address: \_\_\_ Address: 303 Eldridge Street ■ Member ☐ Member Albuquerque, NM 87120 Clearwater, Florida 33755 Authorized Authorized 505.321.7869 Person Person Other Other Other\_\_\_\_ Other Manager Name: \_\_\_ Manager Member Member Address: Authorized Authorized Person Person \_\_Other\_\_\_\_\_ Other Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Nonindexed individuals may be added to the index when filing your Florida Department of State Annual Report form. 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. Signature of an authorized person Dave Childers

Typed or printed name of signee

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "SUPERIOR CONTRACTING & CONSTRUCTION,

L.L.C." IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND

IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS

OF THIS OFFICE SHOW, AS OF THE TWENTY-EIGHTH DAY OF JANUARY, A.D.

2019.

e at coro delaware soy/auth

Authentication: 202152999

Date: 01-28-19

. . . . .