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(Re	equestor's Name)	
(Ac	ldress)	
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(Ĉi	ty/State/Zip/Phone	<i>≡ #</i>)
PICK-UP	☐ WAIT	MAIL
(Bu	ısiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
	Jun Hall	Sanson Sur

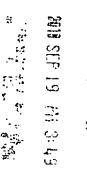




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SEP 30 2019 M. SOLOMON



September 12, 2019

PAMELA WOOD
EAGLE EXTERIORS, LLC.
20395 HIGHWAY 24 SUITE A
COLUMBIANA, AL 35051

SUBJECT: EAGLE EXTERIORS, LLC

Ref. Number: W19000082919

We have received your document for EAGLE EXTERIORS, LLC and check(s) totaling \$260.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

There is a balance due of \$508.75.

According to the application submitted to this office, this entity transacted business in the state of Florida before properly registering with the Florida Department of State, Division of Corporations. Consequently, a \$500 civil penalty and an annual report filing fee for each year the entity failed to properly file a Florida annual report are due this office. Based on the date entered on the application, the civil penalty and annual report filing fees total \$638.75.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Mel Solomon Regulatory Specialist II Supervisor

Letter Number: 019A00018883

RECEIVED SEP 1 9 2019

COVER LETTER

TO:

TO:	Registration Section Division of Corporations
SUBJE	CT: Eagle Exteriors, LLC Name of Limited Liability Company
	Name of Limited Liability Company
	losed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of ce, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.
Please	eturn all correspondence concerning this matter to the following:
	Pamela Wood
	Name of Person
	Eagle Exteriors, LLC
	Firm/Company'
	20395 Highway 25, Suite A
	Columbiana, AL 35051
	City/State and Zip Code
	Pam @ Dui Hoyeagle & Com E-mail address: (to be used for future annual report notification)
For fur	her information concerning this matter, please call:
	Name of Contact Person Area Code Daytime Telephone Number
	MAILING ADDRESS:STREET ADDRESS:Division of CorporationsDivision of CorporationsRegistration SectionRegistration SectionP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301
Enclose	d is a check for the following amount: \$\Pi\$\$ \$125.00 \text{ Filing Fee} \pi\$\$ \$130.00 \text{ Filing Fee} & \Pi\$\$ \$155.00 \text{ Filing Fee} & \Pi\$\$ \$160.00 \text{ Filing Fee, Certificate Copy} \text{of Status & Certified Copy} \text{of Status & Certified Copy}
	+130.00 2018 26000

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

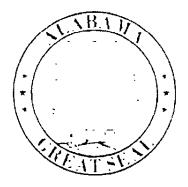
COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: Liability Company, must include "Limited Liability Company," (Jurisdiction under the law of which foreign limited liability company is organized) 19 (not aware of req. requirement) 6. Jame (Mailing Address) 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Office Address: _. Florida <u>3</u>27 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. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: Title or Capacity: Title or Capacity: Name and Address (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 (V) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State of stitutes a third degree felony as provided for in s.817.155, F.S.

John H. Merrill Secretary of State P.O. Box 5616 Montgomery, AL 36103-5616

STATE OF ALABAMA

I, John H. Merrill, Secretary of State of Alabama, having custody of the Great and Principal Seal of said State, do hereby certify that

the entity records on file in this office disclose that Eagle Exteriors, LLC was formed in Shelby County. Alabama on January 3, 2018. The Alabama Entity Identification number for this entity is 505-935. I further certify that the records do not disclose that said entity has been dissolved, cancelled or terminated.



20190827000020718

In Testimony Whereof, I have hereunto set my hand and affixed the Great Seal of the State, at the Capitol, in the city of Montgomery, on this day.

08/27/2019

Date

J. M. Menill

John H. Merrill

Secretary of State