

Division of Corporations

Page 1 of 1

M2000000717

Notice Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H20000019965 3)))



H200000199653AEC%

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : WILLIAMS, PARKER, HARRISON, DIETZ & GETZEN, PLLC
Account Number : 072720000266
Phone : (941) 366-4800
Fax Number : (941) 552-7141

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

**Foreign Limited Liability Company
TRIDENT CONSTRUCTION SERVICES, LLC**

Certificate of Status	1
Certified Copy	1
Page Count	03
Estimated Charge	\$160.00

2020 JAN 17 PM 16:24

2020 JAN 17 PM 16:16

T GLASS

Electronic Filing Menu

Corporate Filing Menu

Help JAN 21 2020

H20000019965 3

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. TRIDENT CONSTRUCTION SERVICES, 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.")

NEBRASKA

84-4154719

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

3. (EIN number, if applicable)

4. (Date first transacted business in Florida, if prior to registration)
(See sections 603.0904 & 603.0903, F.S. to determine penalty liability)

2812 TALLEVAST ROAD

2812 TALLEVAST ROAD

5. (Street Address of Principal Office)

6. (Mailing Address)

SARASOTA, FL 34243

SARASOTA, FL 34243

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

Name: CINDY P. HAYDEN

Office Address: 2812 TALLEVAST ROAD

SARASOTA

34243

(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.

(Registered agent's signature)

CINDY P. HAYDEN

H20000019965 3

H20000019965 3

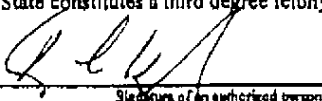
8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage (up to six (6) total):

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
<input checked="" type="checkbox"/> Manager	Name: Trident Building Systems, Inc.	<input type="checkbox"/> Manager	Name: Carl S. Peirat
<input type="checkbox"/> Member	Address: 2812 Tallevast Road	<input type="checkbox"/> Member	Address: 2812 Tallevast Road
<input type="checkbox"/> Authorized	Sarasota, FL 34243	<input type="checkbox"/> Authorized	Sarasota, FL 34243
Person		Person	
<input type="checkbox"/> Other	<input type="checkbox"/> Other	<input checked="" type="checkbox"/> Other President	<input type="checkbox"/> Other
<input type="checkbox"/> Manager	Name: Cindy P. Hayden	<input type="checkbox"/> Manager	Name: Willard G. Peirat
<input type="checkbox"/> Member	Address: 2812 Tallevast Road	<input type="checkbox"/> Member	Address: 2812 Tallevast Road
<input type="checkbox"/> Authorized	Sarasota, FL 34243	<input type="checkbox"/> Authorized	Sarasota, FL 34243
Person		Person	
<input checked="" type="checkbox"/> Other Secretary	<input checked="" type="checkbox"/> Other Treasurer	<input checked="" type="checkbox"/> Other Vice President	<input type="checkbox"/> Other
<input type="checkbox"/> Manager	Name:	<input type="checkbox"/> Manager	Name:
<input type="checkbox"/> Member	Address:	<input type="checkbox"/> Member	Address:
<input type="checkbox"/> Authorized		<input type="checkbox"/> Authorized	
Person		Person	
<input type="checkbox"/> Other	<input type="checkbox"/> Other	<input type="checkbox"/> Other	<input type="checkbox"/> Other

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed 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

CINDY P. HAYDEN, As its Authorized Representative

Typed or printed name of signor

H20000019965 3

STATE OF NEBRASKA

United States of America, } ss.
State of Nebraska }

Secretary of State
State Capitol
Lincoln, Nebraska

I, Robert B. Evnen, Secretary of State of the
State of Nebraska, do hereby certify that

TRIDENT CONSTRUCTION SERVICES, LLC

was duly formed under the laws of Nebraska on December 16, 2019;

**all fees, taxes, and penalties due under the Nebraska Uniform Limited
Liability Company Act or other law to the Secretary of State have been paid;**

**the Company's most recent biennial report required by section 21-125 has
been filed by the Secretary of State;**

the Secretary of State has not administratively dissolved the company;

**the Company has not delivered to the Secretary of State for filing a Statement
of Dissolution;**

a Statement of Termination has not been filed by the Secretary of State.

*This certificate is not to be construed as an endorsement,
recommendation, or notice of approval of the entity's financial
condition or business activities and practices.*

In Testimony Whereof,

I have hereunto set my hand and
affixed the Great Seal of the
State of Nebraska on this date of

January 16, 2020



A handwritten signature in black ink, reading "Robert B. Evnen".

Secretary of State