

(((H200004171593)))



H200004171593ABC3

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 : C T CORPORATION SYSTEM

Account Number : FC40000000023 Phone : (614)280-3338 Fax Number : (954)208-0845

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 Aptim Constructors LLC

Certificate of Status	U
Certified Copy	1
Page Count	04
Estimated Charge	\$155.00

Electronic Filing Menu Corporate Filing Menu

Help [:: (::)

From: Kimberly Laughrey

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

IN COMPLIANCE WITH SECTION (05.0802, PLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDAL

Aptim Constructors LLC	C	· · · · · · · · · · · · · · · · · · ·	**************************************				
(Name of Foreign 1	amited Gashility Company; must include "Cimited	i Lashdity Co m pa	ny, Like, or the)				
(If name unavailable, enter alternate m	and adopted for the purpose of transacting business in Flo	mida, The attemate	name must include "Limited Liabi	lity Company," "I		r. ŋ	
Delaware 2. (Jurisdiction under the law of which foreign limited liability company is organized)		85-3502534 3					
		<u> </u>	5. (ITs number, if applicable)				
4.							
	(Date test transacted business in Donda, if prior to (See sections 605,0904 & 605,0905, F.S. to determi	registration.) ine petulty liability)					
4171 Essen Lane			Essen Lane				
Street Address of Principal Office)		"· 	Mailing Address				
Attn: Melissa Harrell		Ann:	Melissa Harrell				
Baton Rouge, LA 70809		Baton Rouge, LA 70809					
7 Name on Laterat a Ideas	s of Florida registered agent: (P.O. Box	NOT accenta	able)	Ę.	<u>ښ</u>		
7. Name and street addres	s of Piolica registered agent. (1.5. Flox	<u>ivor</u> acce _j u		·:			
Name:	CT Corporation System		_	.	1,		
Office Address:	1200 South Pine Island Road		-	4	華(89	_	
	Plantation		33324 , Florida	•	+		
	(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.

> Terrie Bates, Assistant Secretary (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:	Tille or Capacit	y: Name and Audress:	
⊡Manager	Name: Aptim Environmental & Intrastruc	∐ Manager	Name:	_
≡ Member	Address: 4171 Essen Lane	☐ Member	Aildress:	_
☐ Authorized	Baton Rouge, LA 70809	Authorized		_
Person		Person		
Other	_	□Other	Other	_
□Manager	Name:	□Manager	Name:	_
⊡Member	Address:	_Member	Address:	
□ Authorized		☐ Authorized		
Person		Person		
Other	Other	Other	Other	
_Manager	Name:	Manager	Name:	_
T.Member	Address:	=.Member	Address:	
□ Authorized		□ Authorized		
Person		Person		
□Other	(Other	Cther	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

Wade Bass, Secretary, Aprim Environmental & Infrastructure, LLC

18506176383



Page 1

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

DELAWARE, DO HEREBY CERTIFY "APTIM CONSTRUCTORS LLC" 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 FOURTH DAY OF DECEMBER, A.D. 2020.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN ASSESSED TO DATE.

Authentication: 204234827

Date: 12-04-20