M2000011345

(Requestor's Name)				
(Ad	ldress)			
(Address)				
(Cit	ty/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Bu	isiness Entity Nar	ne)		
(Do	cument Number)			
Certified Copies	_ Certificates	s of Status		
Special Instructions to	Filing Officer:			
<u> </u>				





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K Bumples

CAPITAL CONNECTION, INC. 417 E. Virginia Street, Suite 1 • Tallanassee, Frorida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

SWORDSMEN	ROOFING AND	
CONSTRUCTIO		
		Art of Inc. File
		LTD Partnership File
		Foreign Corp. File
		L.C. File
		Fictitious Name File
		Trade/Service Mark
		Merger File
		Art. of Amend. File
		RA Resignation
		Dissolution/Withdrawal
		Annual Report / Reinstatement
		Cert. Copy
		Photo Copy
		Certificate of Good Standing
		Certificate of Status
		Certificate of Fictitious Name
		Corp Record Search
		Officer Search
		Fictitious Search
Signature		Fictitious Owner Search
		Vehicle Search
		Driving Record
Requested by:		UCC 1 or 3 File
N		UCC 11 Search
Name	Date Time	UCC !! Retrieval
Walk-In	Will Pick Up	Courier

COVER LETTER

TO:	egistration Section ivision of Corporations					
SUBJE	SWORDSMEN ROOFING & CONSTRUCTION LLC					
•	Name of Limited Liability Company					
The en Exister	ed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate and check are submitted to register the above referenced foreign limited liability company to transact business in Flor	e of ida				
Please	rn all correspondence concerning this matter to the following:					
	ANDREA SPAS					
	Name of Person					
	CONTRACTORS REPORTING SERVICE, INC					
	Firm/Company					
	13795 N NEBRASKA AVE					
	Address					
	TAMPA, FL 33613					
	City/State and Zip Code					
	info@activatemylicense.com					
	E-mail address: (to be used for future annual report notification)					
For fur	information concerning this matter, please call:					
	NDREA SPAŞ aı (813) 932-5244					
	Name of Contact Person Area Code Daytime Telephone Number					
	AILING ADDRESS: vision of Corporations pristration Section O. Box 6327 cllahassee, FL 32314 STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301					
Enclose	a check for the following amount: \$125.00 Filing Fee					

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

INCOMPLIANCE WITH SECTION 605.0902, FLORIDA STATIUTES THE POLLOWING ISSUEMITTED TO REGISTERA FOREIGN LIMITED LIABILITY COMPANYTOTRANSACTBUSINESS INTHE STATEOF FLORIDA:

1.	ING & CONSTRUCTION LLC gign Limited Liability Company; must include	e "Limited Liability Company," "L.L.C.,"	or "LLC.")
(If name unavailable, enter al Liability Company," "L.L.C.	iternate name adopted for the purpose of trans " or "LLC.")	sacting business in Florida. The alternate n	name must include "Limited
Z. TEXAS		32064770590	
(Jurisdiction under the law company is organized)	of which foreign limited liability	(FEI number, if applicab	le)
4			
	(Date first transacted business in Flo (See sections 605,0904 & 605,0905, F.	orida, if prior to registration.) S. to determine penalty liability)	
5. 5770 Saintsbury Dr E.			
The Colony	TX	75056	
	(Street Address of Principal	Office)	_
5	· · · · · · · · · · · · · · · · · · ·		
			ZOZO DEC Secología Allanda
11-2-	(Mailing Address)		
7. Name and street addres	ss of Florida registered agent: (P.O. Box		9 5
Name:	CONTRACTORS'REPORTING SERV	VICES, Inc.	
Office Address:	13795 N NBRASKA AVE		
	TAMPA	, Florida 33613	(C) (M)
Registered agent's accep	(City)	(Zip code)	
designated in this applica to complywith the provision accept the obligations of i	gistered agent and to accept service of p tion, I hereby accept the appointment as ons of all statutes relative to the proper to my position as registered agent.	s registered agent and agree to act in that complete performance of my dution is signatural.	this capacity. I further agree
8. The name, title or capa	icity and address of the person(s) who ha	s/have authority to manage is/are:	
Nathaniel S. W	atts		
1310 Creekviev	v Dr., Lewisyille, TX 75067		
9. Attached is a certificate urisdiction under the law of the translator must be si	of existence, no more than 90 days old, of which it is organized. (If the certificate abmitted)	duly authenticated by the official having is in a foreign language, a translation	ig custody of records in the of the certificate under oath
	Mirch Fisher		
	Micah Fisher. Signature of an aut	thorized person	_
This document is executed submitted in a document to	in accordance with section 605.0203 (1) the Department of State constitutes a thi	(b), Florida Statutes, I am aware that a rd degree felony as provided for in s.8	nny false information 17.155, F.S.
	Micah Fisher		

Typed or printed name of signee



Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for Swordsmen Roofing & Construction, LLC. (file number 802807939), a Domestic Limited Liability Company (LLC), was filed in this office on September 06, 2017.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on December 07, 2020.



Ruth R. Hughs Secretary of State

Dial: 7-1-1 for Relay Services TID: 10264 Document: 1011464190002