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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803

Fax Number : (855)330-1010

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

| _ | | | | |
|-------|-----------|--|--|--|
| E1 | Address: | | | |
| rmall | AUDITESS: | | | |

Foreign Limited Liability Company Brandon Construction Services, LLC

21 AUG 16 PM 1: 85 LANG FASSES, FLORIDA

| Certificate of Status | 0 |
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| Certified Copy | 0 |
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APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605 000- FLORIDA STATLIFS. THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED HABILITY.

| · · | | ida. The alternate name must include "Limited Liability Comp | | |
|----------------------------------|---|--|--|--|
| Georgia | | 3. 84-2133577 (FET number: if applied | | |
| (Jurisdiction under the law of w | high foreign limited liability company is organized; | (F.E.I number, IT applied | (адме) | |
| <u></u> | (Date for trans good business in Florida of pour to | reustration) | | |
| 7004 44 6 | (Date first transacted business in Florida, if prior to i See sections 605 0904 & 605 0905, F.S. to determine | | | |
| 7901 4th S | | 6. 860 Johnson Fe | erry Ra | |
| • | erincipal Office) | . | | |
| STE 300 | | Suite 140-123 | | |
| St. Petersb | urg FL 33702 | Atlanta Georgia | 30342 | |
| | | NOT | , · | |
| Name and street addres | ss of Florida registered agent: (P.O. Box | NOT acceptable) | | |
| Name: | Registered Agent | s Inc. | | |
| | 7901 4th St N STI | E 300 | 2 pl. p. | |
| Office Address: | | | | |
| | St. Petersburg | . Florida 33702 | | |

(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: Name: DOUGLAS HOOKER ✓ Manager Manager Name: 860 Johnson Fetry Rd NE, Suite 140-123 Member Address: ☐ Member Address: Atlanta GA 30342 ■Authorized Authorized Person Person Other Other____ Other_ Other Manager Name: _____ Manager Manager Member Address: Member Address: Authorized Authorized Person Person Other Other____ Other_ Other____

Manager

Member

Authorized

Person

Other__

Name: _____

Address:

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.

Name:

Address:

Other____

☐Manager

☐Member

Authorized

Person

Other

- 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, 1 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.

Riley Park

Signature of an authorized person

Fyped or printed name of signee

Control Number: 19081326

STATE OF GEORGIA

Secretary of State

Corporations Division 313 West Tower 2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530



CERTIFICATE OF EXISTENCE

I, Brad Raffensperger, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

Brandon Construction Services, LLC a Domestic Limited Liability Company

was formed in the jurisdiction stated below or was authorized to transact business in Georgia on the below date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

Docket Number : 21774331 Date Inc/Auth/Filed: 06/12/2019 Jurisdiction : Georgia Print Date : 08/12/2021 Form Number : 211



Brad Rafforsperger

Brad Raffensperger Secretary of State