

12/3/21, 5:25 AM

Division of Corporations

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Florida Department of State
Division of Corporations
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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: kathy@apiprocessing.com

Foreign Limited Liability Company
K-Wat Construction & Land Development, LLC

Certificate of Status	0
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Help S. ROBERTS

DEC 03 2021

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. K-Wat Construction & Land Development, 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.")
2. Alabama
(Jurisdiction under the law of which foreign limited liability company is organized)
3. ✓ 84-3846011
(FEI number, if applicable)
4. _____
(Date first transacted business in Florida, if prior to registration.
(See sections 605.0904 & 605.0903, F.S. to determine penalty liability))
5. 227 Southern Oak Drive
(Street Address of Principal Office)
6. 227 Southern Oak Drive
(Mailing Address)
- Dothan, AL 36301
- Dothan, AL 36301

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

Name: API Processing - Licensing, Inc.

Office Address: 3419 Galt Ocean Drive, Suite A

Fort Lauderdale, Florida 33308
(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.

K. W. Adams
(Registered agent's signature)

FILED
2021 DEC -3 PM 12:22
SECRETARY OF STATE
TALLAHASSEE, FL

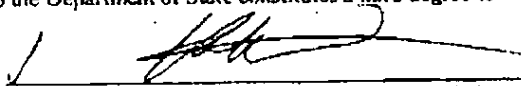
8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage (up to six (6) total):

<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: Kevin Watson	<input type="checkbox"/> Manager	Name: _____
<input type="checkbox"/> Member	Address: 227 Southern Oak Drive	<input type="checkbox"/> Member	Address: _____
<input type="checkbox"/> Authorized	Dothan, AL 36301	<input type="checkbox"/> Authorized	_____
Person	_____	Person	_____
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____
<input checked="" type="checkbox"/> Manager	Name: Misty Watson	<input type="checkbox"/> Manager	Name: _____
<input type="checkbox"/> Member	Address: 227 Southern Oak Drive	<input type="checkbox"/> Member	Address: _____
<input type="checkbox"/> Authorized	Dothan, AL 36301	<input type="checkbox"/> Authorized	_____
Person	_____	Person	_____
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<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

Kevin Watson

Typed or printed name of signer

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 K-WAT CONSTRUCTION & LAND DEVELOPMENT, LLC was formed in Houston County, Alabama on November 21, 2019. The Alabama Entity Identification number for this entity is 593-772. I further certify that the records do not disclose that said entity has been dissolved, cancelled or terminated.



20211124000000930

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.

11/24/2021

Date

A handwritten signature in dark ink, appearing to read 'J. H. Merrill', is written over a horizontal line.

John H. Merrill

Secretary of State