MORDIN	001049
(Requestor's Name) (Address) (Address)	000377463510
(City/State/Zip/Phone #)	12/13/2101032020 ↔€160.00
(Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:	2022 JAH 10 P
W21000159689	PH 2:48
Office Use Only	S. FRANKLIN JAN 2 2 2022

COVER LETTER

TO: **Registration Section Division of Corporations**

Heritage Construction LLC SUBJECT:

Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

	Name of Person		
Heritage Construction LLC			
	Firm/Company		
4720 8th Street			
	Address	2	
Meridian, MS 39307		2022 JAN	
	City/State and Zip Code	AH	
hyder@hebuilt.com		10	
E-mail address: (to be used for future annual report notification)	PH	
er information concerning this matter, pleas	e call:	PM 2: 48	
Hyder Bhatti	601 934-7860 at ()	ŵ	
Name of Contact Person	Area Code Daytime Telephone Number		
Mailing Address:	Street Address:		
Registration Section	Registration Section		
Division of Corporations	Division of Corporations		
P.O. Box 6327	The Centre of Tallahassee		
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		

Please make check payable to: FLORIDA DEPARTMENT OF STATE □ \$125.00 Filing Fee □ \$130.00 Filing Fee & □ \$155.00 Filing Fee & ,

Certificate of Status Certified Copy S160.00 Filing Fee, Certificate of Status & Certified Copy

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:

Heritage Construction I						
(Name of Foreign	Limited Liability Company; must include "Limited	Eliability Company," "	L.L.C.," or "LLC.")			
(If name univailable, enter alternate i	name adopted for the purpose of transacting business in Fl	orida. The alternate name s	nust include "Lamited Liabi	lity Company," "I	"L.C," or "I	J.C.")
Mississippi 2.		3.	(FEI number,			
2. (Jurisdiction under the law of which foreign limited liability company is organized)			if applicable)			
4	Det fort more than a block Same					
	(Date first transacted bismess in Florida, if prior to (See sections 605.0904 & 605.0905, F.S. to determi	ee penalty liability)				
472() 8th Street 5		4720 8th S 6.				
(Street Address of Principal Office)		(Mailing	(Address)			
Meridian, MS	<u></u>	Meridian, I	MS		2027	
39307		39307			NNL	
7. Name and street addres	s of Florida registered agent: (P.O. Box	NOT_acceptable)			O PH	
Name:	Steven Sones			, ,,,, ,	2։ կՑ	• • • • •
Office Address:	1990 8th Ter SE					
	Winter Haven	, Flo	33880 prida			
	(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.

en Chare Sover

(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:	<u>Title or Capacity:</u>		Name and Address:
□Manager	Name:	□Manager	Name:	
Member	Address:	Member	Address:	
Authorized	Meridian, MS 39307	□Authorized		
Person	<u></u>	Person		
Other	Other	Other		□Other
□Manager	Name:	□Manager	Name:	
Member	Address:	□Member	Address:	
□Authorized		Authorized	. <u></u>	
Person		Person		
Other	Other	Other		
□Manager	Name:	□Manager	Name:	;i
□Member	Address:	□Member	Address:	<u> </u>
Authorized	·	Authorized		
Person		Person		
Other	Other	DOther		□Other

<u>Important Notice</u>: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Nonindexed 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.

Bha flyder Signature of an authorized person

Hyder Bhatti

Typed or printed name of signee



Office of the Secretary of State Jackson, Mississippi

Certificate of Good Standing

I. MICHAEL WATSON. Secretary of State of the State of Mississippi, and as such, the legal custodian of the records as required by The Mississippi Limited Liability Company Act to be filed in my office do hereby certify:

HERITAGE CONSTRUCTION, LLC

Registered the 22nd day of September, 2015

A Mississippi Limited Liability Company has filed the necessary documents in this office and has obtained a certificate of formation under the provisions of The Mississippi Limited Liability Company Act as shown by the records in this office.

That the registered office of said Limited Liability Company is located at:

1328 24th Avenue Meridian, MS 39301

And that the registered agent at that address is:

Ali Bhatti Esq

I further certify that said Limited Liability Company has paid the fees for filing the above papers required by law as shown by the records of this office, and that said Limited Liability Company is in good standing to do business in Mississippi at this time.

Given under my hand and seal of office the 6th day of January, 2022

022 JAN 10 PH 2: 41

Michael Watson

Certificate Number: CN22128140 Verify this certificate online at http://corp.sos.ms.gov/corpconv/verifycertificate.aspx



FLORIDA DEPARTMENT OF STATE Division of Corporations

December 16, 2021

HYDER BHATTI 4720 8TH STREET MERIDIAN, MS 39307 US

SUBJECT: HERITAGE CONSTRUCTION LLC Ref. Number: W21000159689

We have received your document for HERITAGE CONSTRUCTION LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Sharon D Franklin Regulatory Specialist II

Letter Number: 421A00030469



www.sunbiz.org