

M220000013317

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

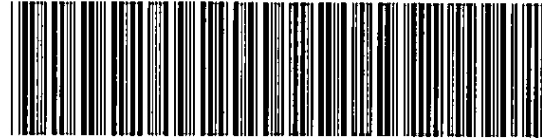
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2022 AUG 22 AM 11:05

FILED

AUG 25 2022

M. SOLOMON

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Southern Truss Companies, LLC

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:

Lawrence S. Klitzman

Name of Person

Klitzman Law Group, PLLC

Firm/Company

1301 International Parkway, Suite 120

Address

Sunrise, Florida 33323

City/State and Zip Code

LSK@Klitzlaw.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Lawrence S. Klitzman

954

384 4421

Name of Contact Person

at (_____) _____

Area Code

Daytime Telephone Number

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

FILED
2022 AUG 22 AM 11:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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. Southern Truss Companies, 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. Wyoming 3. 03-0386727
(Jurisdiction under the law of which foreign limited liability company is organized) (FLL number, if applicable)

4. _____
(Date first transacted business in Florida, if prior to registration)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 2590 North Kings Highway, 6. 2590 North Kings Highway,
(Street Address of Principal Office) (Mailing Address)

Fort Pierce, Florida 34951 Fort Pierce, Florida 34951

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

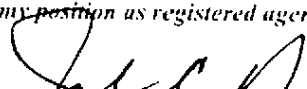
Name: John Byers

Office Address: 2590 North Kings Highway,

Fort Pierce 34951
(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.



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: John Byers	<input type="checkbox"/> Manager	Name: _____
<input type="checkbox"/> Member	Address: _____	<input type="checkbox"/> Member	Address: _____
<input type="checkbox"/> Authorized	2590 North Kings Highway,	<input type="checkbox"/> Authorized	_____
Person	Fort Pierce, Florida 34951	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 _____
<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 _____

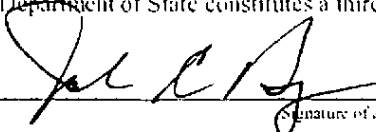
2022 AUG 22 AM 11:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

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

John Byers, Manager

Typed or printed name of signer

STATE OF WYOMING
Office of the Secretary of State

I, EDWARD A. BUCHANAN, SECRETARY OF STATE of the STATE OF WYOMING, do hereby certify that according to the records of this office,


Southern Truss Companies, LLC
is a
Limited Liability Company

formed or qualified under the laws of Wyoming did on **June 17, 2022**, comply with all applicable requirements of this office. This entity has been assigned entity identification number **2022-001127782**.

This entity is in existence and in good standing in this office and has filed all annual reports and paid all annual license taxes to date, or is not yet required to file such annual reports; and has not filed Articles of Dissolution.

I have affixed hereto the Great Seal of the State of Wyoming and duly generated, executed, authenticated, issued, delivered and communicated this official certificate at Cheyenne, Wyoming on this 1st day of August, 2022 at 2:15 PM. This certificate is assigned ID Number 054175823.




Secretary of State

Notice: A certificate issued electronically from the Wyoming Secretary of State's web site is immediately valid and effective. The validity of a certificate may be established by viewing the Certificate Confirmation screen of the Secretary of State's website <https://wyobiz.wyo.gov> and following the instructions displayed under Validate Certificate.

KLITZMAN LAW GROUP, PLLC

LAKE SHORE PLAZA
130 INTERNATIONAL PARKWAY
SUITE 120
SUNRISE, FLORIDA 33323

LAWRENCE S. KLITZMAN
LLM, TAXATION
ALSO ADMITTED IN NEW JERSEY

TELEPHONE 954-384-4121
FACSIMILE 954-389-3579
E-MAIL: LSK@KLITZLAW.COM

August 22, 2022

Via Email Only

Department of State
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Attn: Ms. Melanie Solomon
Email: Melanie.Solomon@DOS.MyFlorida.com

**RE: Southern Truss Companies, LLC & Southern Truss Companies, Inc
Reference Numbers: W2200009510 & P02000008738**

Gentleperson:

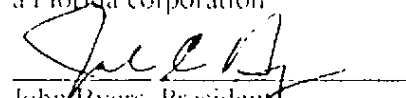
This letter is to confirm that Southern Truss Companies, Inc, a Florida corporation (P02000008738) is being dissolved and that simultaneously, it's successor in interest, Southern Truss Companies, LLC, a Wyoming limited liability company, is applying to do business in the state of Florida under the name Southern Truss Companies, LLC (W2200009510).

At the request of your office, this is to confirm that Southern Truss Companies, Inc, a Florida corporation (P02000008738), shall not revoke its anticipated dissolution provided the Florida Department of State authorizes the use of the name Southern Truss Companies by the successor entity, Southern Truss Companies, LLC, a Wyoming limited liability company (W2200009510).

Thank you.

Southern Truss Companies, Inc
a Florida corporation

by:


John Byers, President



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 20, 2022

LAWRENCE S KLITZMAN
1301 INTERNATIONAL PKWY STE 120
SUNRISE, FL 33323

SUBJECT: SOUTHERN TRUSS COMPANIES, LLC
Ref. Number: W22000095210

We have received your document for SOUTHERN TRUSS COMPANIES, LLC and your check(s) totaling \$125.00. 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.

Consina Griffin-Greaux
Regulatory Specialist II

Letter Number: 322A00016239



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 10, 2022

LAWRENCE S KLITZMAN
1301 INTERNATIONAL PKWY STE 120
SUNRISE, FL 33323

SUBJECT: SOUTHERN TRUSS COMPANIES, LLC
Ref. Number: W22000095210

Please accept our apology for failing to mention this in our previous letter.

The name of your limited liability company is not available in the state of Florida since it is the same as, or it is not distinguishable from the name of an existing entity on our records. Therefore, the limited liability company must select an alternate name for use in the state of Florida.

Please insert the alternate name in the space provided on the application form.

The alternate name must contain the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC". The abbreviations "Ltd." and "Co.," also are no longer acceptable.

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

Mel Solomon
Senior Section Administrator

Letter Number: 522A00017865