

1122000014020

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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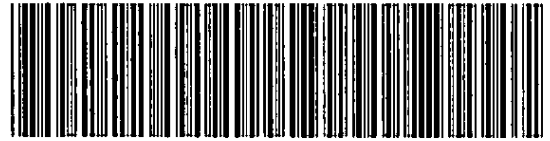
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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T. LEMIEUX

T. LEMIEUX

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2022

COVER LETTER

**TO: Registration Section
Division of Corporations**

Capital Empire Construction Group, 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:

Mark Chastain or John Ray

Name of Person

Capital Empire Construction Group, LLC

Firm/Company

5825 Triangle Drive Suite 213

Address

Raleigh, NC 27617

City/State and Zip Code

mark@cecg-llc.com

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

For further information concerning this matter, please call:

Mark Chastain

985

630-8896

at (_____) _____

Name of Contact Person

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**

☐ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate of Status ☐ \$155.00 Filing Fee & Certified Copy ☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy



3 documents Added/
Submitted

FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 23, 2022

MARK CHASTAIN
5825 TRIANGLE DR STE 213
RALEIGH, NC 27617

SUBJECT: CAPITAL EMPIRE CONSTRUCTION GROUP, LLC
Ref. Number: W22000108677

We have received your document for CAPITAL EMPIRE CONSTRUCTION GROUP, 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.

Tracy L Lemieux
Regulatory Specialist II

Letter Number: 522A00018788

RECEIVED
SEP 08 2022

**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:*

Capital Empire Construction Group, LLC

1. _____
(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.")
North Carolina 46-2711907

2. _____ 3. _____
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

September 1, 2022

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

5825 Triangle Drive

5825 Triangle Drive

5. _____ 6. _____
(Street Address of Principal Office) (Mailing Address)

Suite 213

Suite 213

Raleigh, NC 27617

Raleigh, NC 27617

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

John Ray

Name: _____

2317 Triton Terrace

Office Address: _____

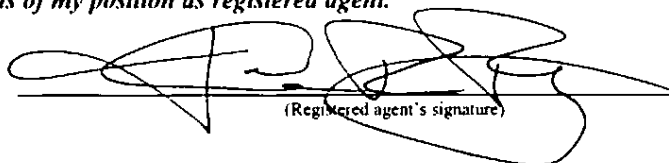
Punta Gorda

33983

_____, Florida _____
(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.


(Registered agent's signature)

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FLORIDA

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:**
☒ Manager Name: John Ray
5825 Triangle Dr
☐ Member Address: Suite 213
☐ Authorized Person Raleigh, NC 27617
☐ Other ☐ Other

Title or Capacity: **Name and Address:**
☒ Manager Name: Mark Chastain
5825 Triangle Dr
☐ Member Address: Suite 213
☐ Authorized Person Raleigh, NC 27617
☐ Other ☐ Other

☒ Manager Name: Michael Kiser
316 NE 31ST STREET
☐ Member Address: CAPE CORAL, FL 33909
☐ Authorized Person
☐ Other ☐ Other

☐ Manager Name: Randall Meade
2317 Triton Terrace
☐ Member Address: Punta Gorda, FL 33983
☒ Authorized Person
☐ Other ☐ Other


☐ Manager Name:
☐ Member Address:
☐ Authorized Person
☐ Other ☐ Other

☐ Manager Name:
☐ Member Address:
☐ Authorized Person
☐ Other ☐ 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

MARK CHASTAIN
Typed or printed name of signee



NORTH CAROLINA

Department of the Secretary of State

CERTIFICATE OF EXISTENCE (Limited Liability Company)

I, ELAINE F. MARSHALL, Secretary of State of the State of North Carolina, do hereby certify that

CAPITAL EMPIRE CONSTRUCTION GROUP LLC

is a limited liability company duly formed, and existing under the laws of the State of North Carolina, having been formed on 30th day of April, 2013

I FURTHER certify that, as of the date of this certificate, (i) the said limited liability company is not dissolved under the terms of its articles of organization, (ii) the said limited liability company's articles of organization are not suspended for failure to comply with the Revenue Act of the State of North Carolina, (iii) that said limited liability company is not administratively dissolved for failure to comply with the provisions of the North Carolina Limited Liability Company Act, (iv) that this office has not filed any decree of judicial dissolution, articles of dissolution, articles of merger, or articles of conversion for said limited liability company.

IN WITNESS WHEREOF, I have hereunto set
my hand and affixed my official seal at the City
of Raleigh, this 7th day of September, 2022.

Elaine F. Marshall

Secretary of State



Scan to verify online.