

M22000015187

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

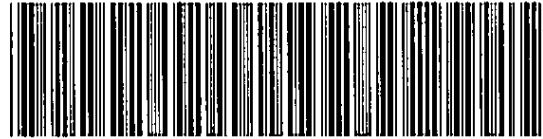
(Document Number)

Certified Copies _____ Certificates of Status _____

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09/09/22--01019--007 **130.00

09/28/22--01018--008 **1050.00

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2022 SEP 26 PM 2:03
CLERK OF SUPERIOR COURT
CLERK OF SUPERIOR COURT

OCT 3 2022

M. SOLOMON

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Grillot Construction, 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:

Priscilla Stafford

Name of Person

Grillot Construction, LLC

Firm/Company

2608 Engineers Rd.

Address

Belle Chasse, LA 70037

City/State and Zip Code

priscilla@grillotllc.com

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

For further information concerning this matter, please call:

Priscilla Stafford

Name of Contact Person

at (504) 394-5596

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 SEP 25 PM 2:03
CLERK 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. Grillot Construction, LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

Grillot, 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. Louisiana 3. 582642699
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. 1/15/2018
(Date first transacted business in Florida, if prior to registration)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 2608 Engineers Rd. 6. 2608 Engineers Rd.
(Street Address of Principal Office) (Mailing Address)

Belle Chasse Belle Chasse

Louisiana, LA 70037 Louisiana, LA 70037

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

Name: C T Corporation System

Office Address: 1200 South Pine Island Rd.

Plantation, Florida 33324
(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.

Christine Kelm
(Registered agent's signature)

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2022 SEP 26 PM 2:03
CLERK OF CIRCUIT COURT
JUDICIAL CIRCUIT IN AND FOR
DADE COUNTY, 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]:

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
<input type="checkbox"/> Manager	Name: <u>Kerry Stafford</u>	<input checked="" type="checkbox"/> Manager	Name: <u>Jason Cox</u>
<input checked="" type="checkbox"/> Member	Address: <u>106 Sirius Ln.</u>	<input type="checkbox"/> Member	Address: <u>4989 A F Pizani St.</u>
<input type="checkbox"/> Authorized	<u>Slidell</u>	<input type="checkbox"/> Authorized	<u>Barataria</u>
Person	<u>Louisiana, 70037</u>	Person	<u>Louisiana, 70036</u>
<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 _____

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.

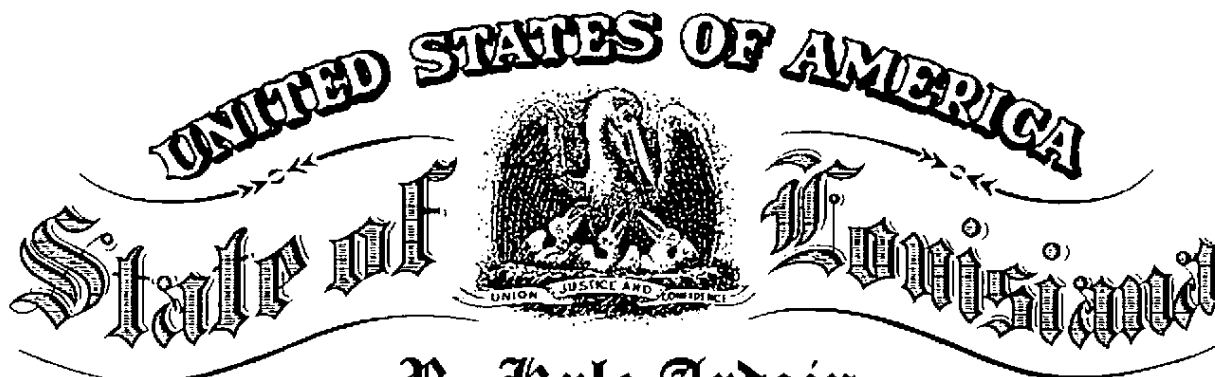
9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must 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.

Priscilla Stafford
Signature of an authorized person

Priscilla Stafford

Typed or printed name of signer



R. Kyle Ardoin
SECRETARY OF STATE

As Secretary of State of the State of Louisiana I do hereby Certify that
the Articles of Organization of

GRILLOT CONSTRUCTION, LLC

Domiciled at BELLE CHASSE, LOUISIANA,

Were filed in this Office and a Certificate of Organization was issued on May 29, 2001,

I further certify that no Certificate of Dissolution or Termination has been issued.

In testimony whereof, I have hereunto set my
hand and caused the Seal of my Office to be
affixed at the City of Baton Rouge on,

September 2, 2022



R. Kyle Ardoin

Secretary of State

Certificate ID: 11621785#DSL73

To validate this certificate, visit the following web site,
go to **Business Services**, **Search for Louisiana**
Business Filings, **Validate a Certificate**, then follow
the instructions displayed.

www.sos.la.gov



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 15, 2022

ORISCILLA STAFFORD
GRILLOT CONSTRUCTION, LLC
2608 ENGINEERS RD.
BELLECHASSE, LA 70037

COPY

SUBJECT: GRILLOT CONSTRUCTION, LLC
Ref. Number: W22000117557

We have received your document for GRILLOT CONSTRUCTION, LLC and check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

According to the application submitted to this office, this entity transacted business in the state of Florida before properly registering with the Florida Department of State, Division of Corporations. Consequently, a \$500 civil penalty and an annual report filing fee for each year the entity failed to properly file a Florida annual report are due this office. Based on the date entered on the application, the civil penalty and annual report filing fees total \$1050.00.

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

Mel Solomon
Senior Section Administrator

Letter Number: 022A00020609

RECEIVED

SEP 26 2022