M22000015264

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
DOM!





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S. FRANKLIN

COVER LETTER

Registration Section

TO:

Name of ALABA Name of "Application by Foreign Limited Liability Co and check are submitted to register the above re rn all correspondence concerning this matter to B. DWAYNE SMITH	ompany for Authorization to Transact Business in Florida, ferenced foreign limited liability company to transact business.	
· · · · · · · · · · · · · · · · · · ·	the following:	
B. DWAYNE SMITH		
	Name of Person	
WAVERLY CONSTRUCTION OF AL	ABAMA, L.L.C.	
	Firm/Company	
50 N. FLORIDA STREET		
	Address	
MOBILE, AL 36607		
Cit	y/State and Zip Code	
scollier@anchordbg.com		
E-mail address: (to be t	sed for future annual report notification)	
information concerning this matter, please call:		
helia Collier	251 459-8467 at ()	
Name of Contact Person	Area Code Daytime Telephone Number	
lailing Address:	Street Address:	
egistration Section vivision of Corporations	Registration Section Division of Corporations	
O. Box 6327	The Centre of Tallahassee	
allahassee, FL 32314	2415 N. Monroe Street, Suite 810	
	Tallahassee, FL 32303	
nclosed is a check for the following amount:		
lease make check payable to: FLORIDA DEPA \$125.00 Filing Fee		

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605 0902, FLORIDA STATUTES, THE FOLLOWING IN SUBMITTED TO REGISTER A FOREIGN LIMITED HABILITY COMPANY TO TRANSACT RUSINESS IN THE STATE OF FLORIDA:

•	Limited Liability Company, must include "Limited I	liability Company," "L. L. C.," or "LLC.")			
 		da. The alternate name must include "Lumited Liability Company," "1			
name mavailable, enter alternate r	unite islopted for the purpose of transacting business in Flori	ida. The alternate name must include "Limited Lisbility Company," "I	. L. C. " or "L.L.C		
ALABAMA		27-2864577			
Throdiction under the law of which foreign limited liability company is organized:		3. (FEI number, if applicable)			
Aurisdiction under the law of w	hich foreign limited liability company is organized:	(FEI number, if applicable)			
	(Date first transacted business in Florida, if prior to reg (See vections 605 0004 & 605 0905, F.S. to determine	gistration.) penalty liability)	70		
6		50 N. Florida Street, Mobile, AL 36607	2022 G T		
cet Address of Principal Office)		6. (Mailing Address)			
			ا دی		
					
			<u></u>		
			06 06		
			ō		
Nama and atmat address	s of Florida registered agent: (P.O. Box 2	NOT acceptable)			
	a or Frontia regimered agent. (Fix), frox j	svi acceptanci			
Name and street address					
Name and silver addres					
Name and sireer address	URS Agents, LLC				
Name:	URS Agents, LLC				
					
Name:	URS Agents, LLC 3458 Lakeshore Drive				
Name:	3458 Lakeshore Drive	31317			
Name:		32312 . Florida			

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.

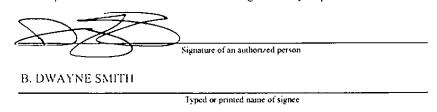
URS figerits, LLC by: Mut Medico Jo-

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:	Title or Capacity:	Name and Address:
□Manager	Name: B. DWAYNE SMITH	□Manager	Name:
■Member	Address: 50 N. FLORIDA STREET	■Member	Address: 50 N. FLORIDA STREET
□Authorized	MOBILE, AL 36607	□Authorized	MOBILE, AL 36607
Person		Person	
Other	Other	Other	Other
	Manage	C) tonourer	Other O
□Manager	Name:	□Manager	Name:
□Member	Address:	□Member	Address:
□Authorized		□Authorized	<u> </u>
Person		Person	
□Other	Other	□Other	Other
□Manager	Name:	□Manager	Name:
□Member	Address:	□Member	Address:
□Authorized		□Authorized	
Person		Person	
Other	Other	□Other	□Other

<u>Important Notice:</u> 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.



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 Waverly Construction of Alabama, L.L.C. was formed in Baldwin County, Alabama on June 16, 2010. The Alabama Entity Identification number for this entity is 000-448391. I further certify that the records do not disclose that said entity has been dissolved, cancelled or terminated.



20220912000010950

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.

09/12/2022

Date

X 24. Muill

John H. Merrill

Secretary of State



September 25, 2022

B. DWAYNE SMITH 50 N FLORIDA STREET MOBILE, AL 36607 US

SUBJECT: WAVERLY CONSTRUCTION OF ALABAMA, L.L.C.

Ref. Number: W22000121839

We have received your document for WAVERLY CONSTRUCTION OF ALABAMA, L.L.C. and your check(s) totaling \$100.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

There is a balance due of \$25.00.

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

RECEIVED

Letter Number: 922A00021350