

M22000015943

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

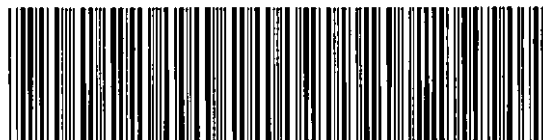
(Document Number)

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APPROVED  
AND  
FILED

2022 OCT 17 AM 9:00

RECEIVED  
FBI MISSOURI

2022 OCT 17 PM 5:09

OCT 17 2022

Compton

CORPORATION SERVICE COMPANY  
1201 Hays Street  
Tallahassee, FL 32301  
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 029919 7870600

AUTHORIZATION

*[Handwritten Signature]*

COST LIMIT : \$155.00

ORDER DATE : October 14, 2022

ORDER TIME : 11:09 AM

ORDER NO. : 029919-005

CUSTOMER NO: 7870600

FOREIGN FILINGS

NAME: ORION INDUSTRIAL CONSTRUCTION,  
LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY  
       PLAIN STAMPED COPY  
       CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Alexxis Weiland -- EXT#

EXAMINER: \_\_\_\_\_

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** Orion Industrial 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:

Lauren Blackburn

Name of Person

Orion Group Holdings, Inc.

Firm/Company

12000 Aerospace Avenue, Suite 300

Address

Houston, TX 77034

City/State and Zip Code

orionlegal@orn.net

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

For further information concerning this matter, please call:

Lauren Blackburn

713

852-6589

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

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. Orion Industrial Construction, LLC  
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

Orion Industrial Construction, LLC - LA

(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. 20-5538311  
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI 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. 12000 Aerospace Avenue, Suite 300 12000 Aerospace Avenue, Suite 300  
(Street Address of Principal Office) (Mailing Address)

Houston, TX 77034

Houston, TX 77034

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

Name: Corporation Service Company

Office Address: 1201 Hays Street

Tallahassee 32301  
(City) (Zip code)

APPROVED  
AND  
FILED  
2022 OCT 17 AM 9:00  
TALLAHASSEE, FLA  
FBI

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.

Corporation Service Company

By: Alexis Weibnd, assistant vice president  
(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:**

☐ Manager                      Name: Orion Group Holdings, Inc.

☒ Member                      Address: 12000 Aerospace Avenue

☐ Authorized                      Suite 300

Houston, TX 77034

Person

☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

**Title or Capacity:**                      **Name and Address:**

☒ Manager                      Name: Travis J. Boone

☐ Member                      Address: 12000 Aerospace Avenue

☒ Authorized                      Suite 300

Houston, TX 77034

Person

☒ Other President                      ☐ Other \_\_\_\_\_

☐ Manager                      Name: Peter R. Buchler

☐ Member                      Address: 12000 Aerospace Avenue

☒ Authorized                      Suite 300

Houston, TX 77034

Person

☒ Other Secretary                      ☐ Other \_\_\_\_\_

☐ Manager                      Name: G. Scott Thanisch

☐ Member                      Address: 12000 Aerospace Avenue

☒ Authorized                      Suite 300

Houston, TX 77034

Person

☒ Other EVP                      ☐ Other \_\_\_\_\_

☐ Manager                      Name: Lauren Blackburn

☐ Member                      Address: 12000 Aerospace Avenue

☒ Authorized                      Suite 300

Houston, TX 77034

Person

☒ Other Asst Secretary                      ☐ 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.

*Lauren S. Blackburn*

\_\_\_\_\_  
Signature of an authorized person

Lauren Blackburn, Assistant Secretary

\_\_\_\_\_  
Typed or printed name of signee



**R. Kyle Ardoin**

**SECRETARY OF STATE**

*As Secretary of State of the State of Louisiana, I do hereby Certify that*

**ORION INDUSTRIAL CONSTRUCTION, LLC**

A limited liability company domiciled in BATON ROUGE, LOUISIANA,

Filed charter and qualified to do business in this State on August 31, 2006,

I further certify that the records of this Office indicate the company has paid all fees due the Secretary of State, and so far as the Office of the Secretary of State is concerned, is in good standing and is authorized to do business in this State.

I further certify that this certificate is not intended to reflect the financial condition of this company since this information is not available from the records of this Office.

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,

October 17, 2022

*Secretary of State*

Web 36260563K



Certificate ID: 11639525#3PK73

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](http://www.sos.la.gov)**