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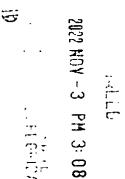
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	_

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T. LETTEUX
DEC - 1 2022

## , COVER LETTER

TO:

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TO:	Registration Section  Division of Corporations	۶.
SUBĴ	Select Contracting LLC  JECT:	
	Name	of Limited Liability Company
		elect Contracting LLC  Name of Limited Liability Company  Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of check are submitted to register the above referenced foreign limited liability company to transact business in Florida. It correspondence concerning this matter to the following:    Jason Todd
Pleaso	e return all correspondence concerning this matter to	the following:
	Jason Todd	
		Name of Person
	Select Contracting LLC	
		Firm/Company
	2220 Denmark Rd	
		Address
	Danville, IL. 61832	
	Ci	ty/State and Zip Code
	jtselect1@gmail.com	
	E-mail address: (to be	used for future annual report notification)
For fu	urther information concerning this matter, please call	:
	Jason Todd	at (
	Name of Contact Person	Area Code Daytime Telephone Number
Mailing Address: Registration Section		<del></del>
	Division of Corporations	<u>-</u>
	P.O. Box 6327 Tallahassee, FL 32314	
	Enclosed is a check for the following amount:  Please make check payable to: FLORIDA DEPA  \$\Begin{array}{c} \Boxed{\text{Plane}} \$\$125.00 Filing Fee  \Boxed{\text{C}} \$\$130.00 Filing Fee  \Certificate of \text{Certificate of } \end{array}	& 🗆 \$155.00 Filing Fee & 🗆 \$160.00 Filing Fee, Certificate

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

IN COMPILANCE 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: Select Contracting LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") S & JT Select Contractring 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 "L.L.C." 47-5239853 Illinois (Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable) (Date first transacted business in Florida, if prior to registration.) (See sections 605,0904 & 605,0905, F.S. to determine penalty liability) 2220 Denmark Rd 2220 Denmark Rd (Mailing Address) (Street Address of Principal Office) Danville, IL, 61832 Danville, IL. 61832 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) JASON TODD

16431 Millstone Circle # 104

Fort Myers, (Circ) Florida 33908

(Zin sude) Name: 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

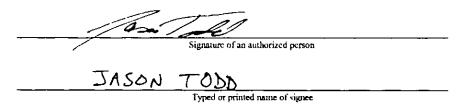
Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all 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.

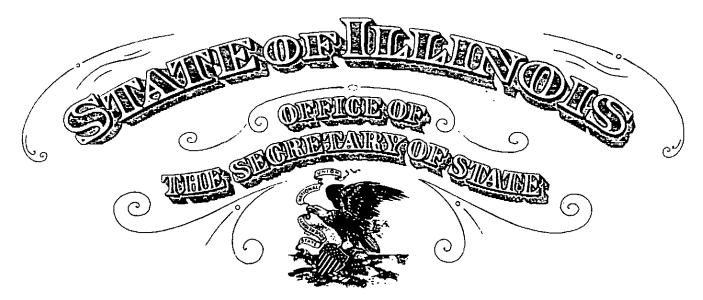
(Registered agent's signature)

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage lup to six (6) totall:

Title or Capacity:	Name and Address:	Title or Capacity:	Name and Address
<b>≣</b> Manager	Name: Stacey Todd	<b>■</b> Manager	Name: Jason Todd
□Member	Address: 2220 Denmark Rd	□Member	Address: 2220 Denmark Rd
□Authorized	Danville, IL. 61832	□Authorized	Danville, IL. 61832
Person	217-474-5902	Person	217-474-7377
Owner-Cha ■Other	iman	Oumar Dem	sident □Other
⊐Manager	Name:	□Manager	Name:
□Member	Address:	□Member	Address:
□Authorized		□Authorized	
Person		Person	
Other	□Other	[]Other	□Other
∐Manager	Name:	□Manager	Name:
]]Member	Address:	□Member	Address:
□Authorized		□Authorized	
Person		Person	
□Other	Other	□Other	Other

- 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.





## To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that I am the keeper of the records of the Department of Business Services. I certify that

SELECT CONTRACTING LLC, HAVING ORGANIZED IN THE STATE OF ILLINOIS ON OCTOBER 05, 2015, APPEARS TO HAVE COMPLIED WITH ALL PROVISIONS OF THE LIMITED LIABILITY COMPANY ACT OF THIS STATE, AND AS OF THIS DATE IS IN GOOD STANDING AS A DOMESTIC LIMITED LIABILITY COMPANY IN THE STATE OF ILLINOIS.



In Testimony Whereof, I hereto set

my hand and cause to be affixed the Great Seal of the State of Illinois, this 31ST day of OCTOBER A.D. 2022 .

Authentication #: 2230401724 verifiable until 10/31/2023

Authenticate at: https://www.ilsos.gov

Desse White

SECRETARY OF STATE