

3/9/23, 10:04 PM

Division of Corporations

M2300002987

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((H230000899963))



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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : COURACCESS CENTERS, LLC
Account Number : 075350000541
Phone : (813)875-1333
Fax Number : (813)200-1050

2023
MAR 10 2023

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: ManMercado2121@gmail.com

Foreign Limited Liability Company Manuel Mercado Construction LLC

Certificate of Status	1
Certified Copy	0
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S. ROBERTS

MAR 10 2023

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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. Manuel Mercado Construction LLC (Name of Foreign Limited Liability Company - must include "Limited Liability Company," "LLC," 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," "LLC," or "LLC".

2. Texas (Jurisdiction under the law of which foreign limited liability company is organized) 3. 92-2732273 (LL number, if applicable)

4. 3/9/2023 (Date first transacted business in Florida, if prior to registration. See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 2507 NW 7th Street, Cape Coral, FL 33993 (Street Address of Principal Office) 6. 2507 NW 7th Street, Cape Coral, FL 33993 (Mailing Address)

7. Name and street address of Florida registered agent (P.O. Box NOT acceptable) Name: Manuel Mercado Office Address: 2507 NW 7th Street, Cape Coral, Florida 33993

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.

DocuSigned by: [Signature] Registered Agent: Manuel Mercado

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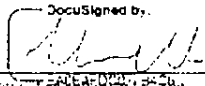
8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

<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>Manuel Mercado</u>	<input type="checkbox"/> Manager	Name: _____
<input checked="" type="checkbox"/> Member	Address: <u>2507 NW 7th Street</u>	<input type="checkbox"/> Member	Address: _____
<input type="checkbox"/> Authorized Person	<u>Cape Coral, FL 33993</u>	<input type="checkbox"/> Authorized 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 Person	_____	<input type="checkbox"/> Authorized 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 Person	_____	<input type="checkbox"/> Authorized 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.

DocuSigned by:


Signature of an authorized person

Manuel Mercado

Typed or printed name of signer

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Corporations Section
P.O. Box 13697
Austin, Texas 78711-3697

Audit# H23000089996
Jane Nelson
Secretary of State



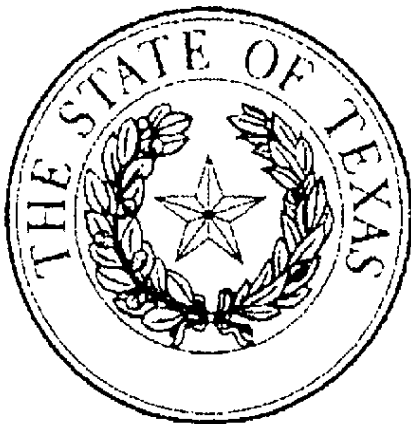
Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for Manuel Mercado Construction LLC (file number 8049-18333), a Domestic Limited Liability Company (LLC), was filed in this office on February 28, 2023.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on March 08, 2023.



Handwritten signature of Jane Nelson in black ink.

Jane Nelson
Secretary of State

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