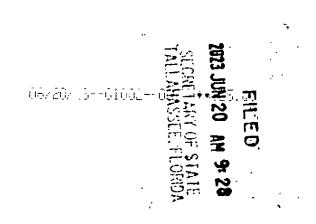
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| (Requestor's Name) |
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| (Address) |
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| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
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| CERTIFIED COPY PHOTOCOPY CUS | |
| FILING | FOREIGN LLC |
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COVER LETTER

| TO: | Registration Section Division of Corporations | |
|-------------------|---|--|
| SUBJI | Alabama Construction Experts LLC | |
| | Na | me of Limited Liability Company |
| The en Exister | nclosed "Application by Foreign Limited Liabilit ence, and check are submitted to register the abov | by Company for Authorization to Transact Business in Florida," Certificate of we referenced foreign limited liability company to transact business in Florida. |
| Please | return all correspondence concerning this matte | r to the following: |
| | Jessica | |
| | | Name of Person |
| | Registered Agent Solutions, Inc. | |
| | | Firm/Company |
| | 5301 Southwest Parkway, Suite 400 | |
| | | Address |
| | Austin, TX 78735 | |
| | | City/State and Zip Code |
| | orders@rasi.com | |
| | E-mail address: (to | be used for future annual report notification) |
| For furt | ther information concerning this matter, please of | ail: |
| | Marvin A Castellanos Bonilla | 888 413-7743 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 DE \$125.00 Filing Fee \$130.00 Filing Fee Certificate | ee & 🔲 \$155.00 Filing Fee & 🗍 \$160.00 Filing Fee, Certificate |

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

IN COMPLIANCE WITH SECTION 605,0002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

| | name adopted for the purpose of transacting business in Flo | rids, the atternate name must include "Limited Liabil | ity Company," "L.L.C." or "LLC,") |
|--|---|---|-----------------------------------|
| labama | | 47-1181017 3 | |
| (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 r (See sections 605.0904 & 605.0905, F.S. to determine | egistration.) ic penalty fiability) | |
| 108 Grants Mill Rd | | 1108 Grants Mill Rd | |
| t Address of Principal Office) | · · · · · · · · · · · · · · · · · · · | 6. (Mailing Address) | |
| rondale, Al. 35210 | | Irondale, AL 35210 | |
| -,- | | | |
| | | | 등록 😉 _ |
| lame and street addres | ss of Florida registered agent: (P.O. Box | NOT acceptable) | 120 186 |
| | | | |
| Name: | Registered Agent Solutions, Inc. | | |
| | 3004 P | · · · · · · · · · · · · · · · · · · · | € 6 |
| Office Address: | 2894 Remington Green Ln. Ste. A | | • |
| | Tallahassee | 32308 | |
| | | , Florida (Zip code) | |

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: Name: Marvin A Castellanos Bonilla Name: Dina I. Rosales □ Manager □ Manager Address: 1108 Grants Mill Rd 1108 Grants Mill Rd ■ Member ■ Member Irondale, AL 35210 Irondale, AL 35210 □ Authorized ☐ Authorized Person Person Other_ □Other____ ☐ Other_____ □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_____

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.

Signature of an authorized person

Marvin A Castellanos Bonilla

Typed or printed name of signee

Wes Allen Secretary of State P.O. Box 5616 Montgomery, AL 36103-5616

STATE OF ALABAMA

I, Wes Allen, 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 Alabama Construction Experts LLC was formed in Jefferson County on July 14, 2014. The Alabama Entity Identification number for this entity is 000-313-863. I further certify that the records do not disclose that said entity has been dissolved, cancelled or terminated.



20230620000025804

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.

06/20/2023

Date

Wer Och

Wes Allen

Secretary of State