

M23000008314

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

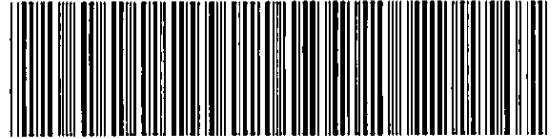
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300408454113

05/16/23--01002--031 **155.00

FILED
2023 JUN 26 PM 4:11
SECRETARY OF STATE
TALLAHASSEE, FL

RECEIVED

MAY 15 2023

W23-75515



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 26, 2023

ROBERT AHISTEDT
3220 7TH STREET
METAIRIE, LA 70002 US

SUBJECT: AHISTEDT DRYWALL, LLC
Ref. Number: W23000075515

We have received your document for AHISTEDT DRYWALL, LLC and check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

Unfortunately, the enclosed certified copy does not meet our filing requirements. We require a certificate of existence or certificate of good standing, which usually consists of a single sheet of paper that clearly reflects the entity is a valid entity in its home state/country. You can obtain the certificate of existence or certificate of good standing from the same office that provided you with the certified copy.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Ariel Jones
Regularoty Specialist II

Letter Number: 123A00012159

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Ahistedt Drywall, 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:

Robert Ahistedt
Name of Person

Ahistedt Drywall, LLC
Firm/Company

3220 7th Street
Address

Metairie, LA 70002
City/State and Zip Code

bobby@ahistedtdrywall.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Mandy Lee at (504) 621-6558
Name of Contact Person Area Code Daytime Telephone Number

mlee@ahistedtdrywall.com

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. Ahistedt Drywall, 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. Louisiana
(Jurisdiction under the law of which foreign limited liability company is organized)

3. 90-1009253
(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. 3220 7th St.
(Street Address of Principal Office)

6. PO BOX 6155
(Mailing Address)

Metairie, LA 70002

Metairie, LA 70009

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

Name: Stephanie A. Potts

Office Address: 5930 George Rd.

TAMPA, Florida 33634
(City) (Zip code)

FILED
2023 JUN 26 PM 4:11
SECRETARY OF STATE
TALLAHASSEE, FL

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.

Stephanie Potts
(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: Mandy Lee

☐ Member Address: 3220 7th St.

☐ Authorized Metairie, LA 70002

Person _____

☐ Other _____ ☐ Other _____

☐ Manager Name: _____

☐ Member Address: _____

☐ Authorized _____

Person _____

☐ Other _____ ☐ Other _____

☐ Manager Name: _____

☐ Member Address: _____

☐ Authorized _____

Person _____

☐ Other _____ ☐ Other _____

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

☒ Manager Name: Matthew Reed

☐ Member Address: 3220 7th St.

☐ Authorized Metairie, LA 70002

Person _____

☐ Other _____ ☐ Other _____

☐ Manager Name: _____

☐ Member Address: _____

☐ Authorized _____

Person _____

☐ Other _____ ☐ 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.

Mandy Lee
Signature of an authorized person

Mandy Lee
Typed or printed name of signer



R. Kyle Ardoin
SECRETARY OF STATE

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

AHLSTEDT DRYWALL, L.L.C.

A limited liability company domiciled in METAIRIE, LOUISIANA,

Filed charter and qualified to do business in this State on August 06, 2013,

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,

June 19, 2023

Secretary of State

Web 41252777K



Certificate ID: 11745083#NVM73

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



R. Kyle Ardoin
SECRETARY OF STATE

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

AHLSTEDT DRYWALL, L.L.C.

Domiciled at METAIRIE, LOUISIANA,

Were filed in this Office and a Certificate of Organization was issued on August 06,
2013,

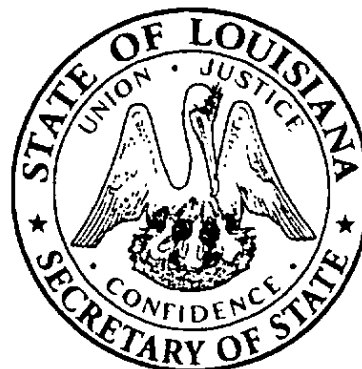
I further certify that no Certificate of Dissolution or Termination has been issued.

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,

June 19, 2023

Secretary of State

Web 41252777K



Certificate ID: 11745082#ESL73

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