

M23000014341

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

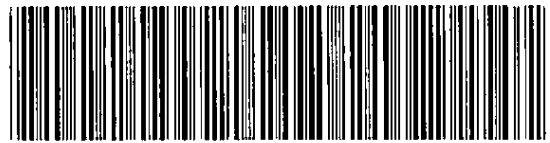
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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10/18/23-H01123--006 *\$160.00

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FILED

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Schwob Steel Services, 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:

Lindsay Shehan

Name of Person

Schwob Steel Services, LLC

Firm/Company

1350 Lakeshore Dr., Suite 160

Address

Coppell, TX 75019

City/State and Zip Code

lshehan@schwob.com

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

For further information concerning this matter, please call:

Lindsay Shehan

972

243-7674

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



Florida Department of State – Division of Corporations:

Attn: Andrea Andrews

Document Number: W23000060641

Andrea,

We submitted this application on April 12th, and the filing was rejected. Since its rejection, Schwob Corporation has dissolved, freeing up the entity and name of Schwob Steel Services, LLC. (which was once Schwob Corporation).

I was instructed to resend this application, with an updated certificate of fact/good standing.

Let me know if you have any questions, Thank you for your help.

Lindsay Shehan

972-243-7674

Lshehan@schwob.com



Copy #1

Florida Department of State- Division of Corporations:

Step 2: SCHWOB STEEL SERVICES, LLC

Application by Foreign Limited Liability Company, for Authorization to Transact Business in Florida-

Included in this step:

- . Cover Letter
- . Application
- . Certificate of Fact from the State of Texas
- . Certificate of Formation from the State of Texas
- . Certificate of Filing from the State of Texas
- . Filing Fee - \$160

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. Schwob Steel Services, LLC
(Name of Foreign Limited Liability Company, must include "Limited Liability Company," "L.L.C.," 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," "L.L.C.," or "LLC.")

2. Texas 3. 85-3982114
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

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

5. 1350 Lakeshore Dr. 6. 1350 Lakeshore Dr.
(Street Address of Principal Office) (Mailing Address)
Suite 160 Suite 160
Coppell, TX 75019 Coppell, TX 75019

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

Name: CT Corporation System
Office Address: 1200 South Pine Island Road
Plantation, Florida 33324
(City) (Zip code)

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RECEIVED

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.

Denise Bell

Denise Bell

(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: Andrew Erickson

☐ Member Address: 1350 Lakeshore Dr.

☐ Authorized Suite 160

Person Coppell, TX 75019

☒ Other Owner/President ☐ Other

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

☐ Manager Name: _____

☐ Member Address: _____

☐ Authorized _____

Person _____

☐ Other _____ ☐ Other

☐ Manager Name: _____

☐ Member Address: _____

☐ Authorized _____

Person _____

☐ Other _____ ☐ Other

☐ Manager Name: _____

☐ Member Address: _____

☐ Authorized _____

Person _____

☐ Other _____ ☐ Other

☐ Manager Name: _____

☐ Member Address: _____

☐ Authorized _____

Person _____

☐ Other _____ ☐ Other

☐ Manager Name: _____

☐ Member Address: _____

☐ Authorized _____

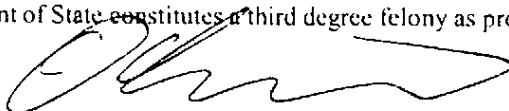
Person _____

☐ 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.



Signature of an authorized person

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



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, Public Information Report (PIR) for Schwob Steel Services, LLC (file number 804417803), a Domestic Limited Liability Company (LLC), was filed in this office on December 31, 2021.

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

Delayed Effective date: April 06, 2022

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 September 26, 2023.



A handwritten signature in black ink that reads "Jane Nelson".

Jane Nelson
Secretary of State