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SECTETARY OF STATE

T. LEMIEUX

COVER LETTER

TO:

Registration Section

UBJECT:	Southern Painting & Maintenance Specialists, LLC				
	Name of Limited Liability Company				
		Company for Authorization to Transact Business in Florida," Certificate o referenced foreign limited liability company to transact business in Florid			
lease return	n all correspondence concerning this matter to	o the following:			
	Robert Maffett				
	Name of Person				
	Southern Painting & Maintenance Specialists, LLC				
	Firm/Company				
	PO Box 16688				
	Address				
	Greenville, SC 29606				
	City/State and Zip Code				
	spminc@southernpainting-sc.com				
	E-mail address: (to be	e used for future annual report notification)			
or further i	information concerning this matter, please ca	II:			
Lisa Horvath		864 775-0108			
	Name of Contact Person	Area Code Daytime Telephone Number			
Mailing Address:		Street Address:			
Registration Section		Registration Section			
Division of Corporations		Division of Corporations			
	O. Box 6327	The Centre of Tallahassee			
1 2	illahassee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			
	closed is a check for the following amount:	PADTAIENT (NE STATE			
	\$125.00 Filing Fee \$130.00 Filing Fe				
	Certificate of				

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:

ame unavailable, enter alternate	name adopted for the purpose of transacting business in Flo	rida. The alternate name must include "Limited	Liability Company," "L.L.C," or "LLC.
South Carolina (Jurisdiction under the law of which foreign limited liability company is organized)		57-0654335 3	
		(FEI nur	(FEI number, if applicable)
January 2024			
	(Date first transacted business in Florida, if prior to r (See sections 605,0904 & 605,0905, F.S. to determine	egistration.) e penalty liability)	
908 Laurens Rd		PO Box 16688	
et Address of Principal Office)		6. (Mailing Address)	 .
Greenville, SC 29607		Greenville, SC 29606	
Name and <u>street addres</u>	ss of Florida registered agent: (P.O. Box	NOT acceptable)	2024 SE
Name and <u>street addres</u> Name:	ss of Florida registered agent: (P.O. Box CT Corporation System	NOT acceptable)	2024 JAN 22 SEL TTATA SEL TTATA
		NOT acceptable)	2024 JAN 22 AM IO SEN TANY OF S
Name:	CT Corporation System 1200 S Pine Island Rd Plantation	 	2024 JAN 22 AM IO: 21 SEL TANY OF STATE TAN A PASSEE FI
Name:	CT Corporation System 1200 S Pine Island Rd	33324	2024 JAN 22 AM IO: 21 SEL TANY OF STATE TAN PHASSEE FI

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:
■Manager	Name: Robert Maffett	■Manager	Name: Jason Dickson
□Member	Address: 908 Laurens Rd	□Member	Address: 908 Laurens Rd
Authorized	Greenville, SC 29607	Authorized	Greenville, SC 29607
Person		Person	
□Other		Other	□Other
■Manager	Name: Armand Lockett	□Manager	Name:
□Member	Address: 908 Laurens Rd	□Member	Address: 908 Laurens Rd
Authorized	Greenville, SC 29607	■ Authorized	Greenville, SC 29607
Person		Person	
□Other	Other	□Other	□Other
□Manager	Name:	□Manager	Name:
□Member	Address:	□Member	Address:
□Authorized		□Authorized	
Person		Person	
□Other	Other	□Other	Other

<u>Important Notice:</u> 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

Typed or printed name of signee

The State of South Carolina



Office of Secretary of State Mark Hammond

Certificate of Existence

I, Mark Hammond, Secretary of State of South Carolina Hereby Certify that:

SOUTHERN PAINTING AND MAINTENANCE SPECIALISTS, LLC, a limited liability company duly organized under the laws of the State of South Carolina on March 14th, 1977, with a duration that is until December 31st, 2099, has as of this date filed all reports due this office, paid all fees, taxes and penalties owed to the State, that the Secretary of State has not mailed notice to the company that it is subject to being dissolved by administrative action pursuant to S.C. Code Ann. 33-44-809, and that the company has not filed articles of termination as of the date hereof.

Given under my Hand and the Great Seal of the State of South Carolina this 11th day of January, 2024.

Mark Hammond Secretary of State