

2/16/24, 11:08 AM

Division of Corporations

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

M240000648263

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To:

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

From:

Account Name : BUSINESS FILINGS
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****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: jackie@mcandflooring.com

Foreign Limited Liability Company
MORAN CARPETS & FLOORING LLC

Certificate of Status	0
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Fax Audit # H24000064826.3

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

IN COMPLIANCE WITH SECTION 605.09, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. MORAN CARPETS & FLOORING 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. Alabama 3. 47-3355790
(Jurisdiction under the law of which foreign limited liability company is organized) (TIN number, if applicable)

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

5. 1110 US Hwy 31 S 6. 1110 US Hwy 31 S
(Street Address of Principal Office) (Mailing Address)

Athens, Alabama 35611

Athens, Alabama 35611

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

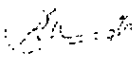
Name: Business Filings Incorporated

Office Address: 1200 South Pine Island Road

Plantation Florida 33324
(City) (Zip code)

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.


(Registered agent's signature)

Chris Das, A.V.P., Business Filings Incorporated

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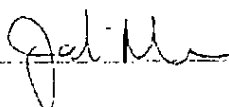
8. For initial indexing purposes, list names, title or capacity and addresses of the primary members, managers or persons authorized to manage (up to six (6) total):

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
☒ Manager	Name: Jackie Moran	☐ Manager	Name: _____
☐ Member	Address: _____	☐ Member	Address: _____
☐ Authorized	1110 Us Hwy 31 S.	☐ Authorized	_____
Person	Athens, Alabama 35611	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 _____	☐ 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 605.0205 (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

Jackie Moran, Manager

 Typed or printed name of signer

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 MORAN CARPETS &
FLOORING LLC was formed in Limestone County on August 14, 2015. The
Alabama Entity Identification number for this entity is 000-342-513. I further
certify that the records do not disclose that said entity has been dissolved,
cancelled or terminated.



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.

02/16/2024

Date

A handwritten signature in black ink, appearing to read 'Wes Allen', is written over a horizontal line.

20240216000011436

Wes Allen

Secretary of State