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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer.	
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Office Use Only



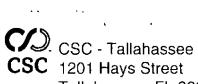
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Tallahassee, FL 32301-2607 850-558-1500, Ext: 61592

To: Department Of State, Division Of Corporations

From: Alexxis Weiland-Sorenson

Ext: 61592 Date: 02/19/24 Order #: 1423298-1

Re: Ahtna Construction & Primary Products Company, LLC

Processing Method: Routine

TO WHOM IT MAY CONCERN:

Enclosed please find:

Application for Certificate of Authority

Amount to be deducted from our State Account: \$125.00 - FL State Account Number:

Land Blenon

12000000195

AUTH:

Please take the following action: File in your office on basis

Issue Proof of Filing

Special Instructions:

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

COVER LETTER

TO:

	tna Construction & Primary Products	Company, LLC			
	Name of Limited Liability Company				
losed "A ce, and cl	pplication by Foreign Limited Liability neck are submitted to register the above	Company for Authorization to Transa referenced foreign limited liability co	ct Business in Florida," Certif mpany to transact business in		
eturn all	correspondence concerning this matter t	o the following:			
	Sue Tyree, Paralegal				
	-	Name of Person			
	Ahtna, Incorporated				
		Firm/Company			
	110 W. 38th Ave.				
		Address			
	Anchorage, AK 99503				
	C	ity/State and Zip Code	<u></u>		
;	styree@ahtna.net				
_	E-mail address: (to be	used for future annual report notifica	tion)		
ner infori	nation concerning this matter, please ca	1:			
Sue Ty	rree	907 433-0757			
	Name of Contact Person	Area Code Daytime	Telephone Number		
Mailing Address:		Street Address:			
Registration Section			Registration Section		
	on of Corporations	Division of Corporations			
	ox 6327	The Centre of Tallahassee			
Tallaha	assee, FL 32314	2415 N. Monroe Street, Su Tallahassee, FL 32303	N. Monroe Street, Suite 810		
		rananassee, 11, 32303			

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;

(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 Flo	orida. The alternate name must include "Limited I.	iability Company," "L.L.C." or "LLC."		
Alaska		92-0040299 3.			
(Jurisdiction under the law of w	hich foreign limited liability company is organized)	3(FEI num	ber, if applicable)		
Have not started ope	erating yet; contract awarded by U.S.		/23		
	(Date first transacted business in Florida, if prior to 1 (See sections 605.0904 & 605.0905, F.S. to determine	egistration.) ne penalty liability)			
110 W. 38th Ave., Ste 100D		Same as street address 6. (Mailing Address)			
Anchorage, AK 9950	03				
Name and street address	ss of Florida registered agent: (P.O. Box	NOT acceptable)	2024 FEB		
Name:	Corporation Service Company		19 FK		
Office Address:	1201 Hays Street				
	Tallahassee	32301 Florida			
	(Cny)	(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.

By: Wulard-Sanson, AVP

(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:	Title or Capacity:	Name and Address:
□Manager	Name: Ahtna Netiye', LLC	□Manager	Name:
■Member	Address: 110 W 38th Ave., Ste 100B	□Member	Address: 110 W 38th Ave., Suite 100D
□Authorized	Anchorage, AK 99503	■Authorized	Anchorage, AK 99503
Person		Person	
□Other		□Other	Other
□Manager	Name:	□Manager	Name:
□Member	Address:	□Member	Address:
□Authorized		□Authorized	
Person		Person	
□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 605,0203 (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

Roy Tansy Jr, Member Representative for Sole Member Ahtna Netive', LLC