Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803

Fax Number : (813)436-5206

*Enter the email address for this business entity to be used for future and address please.**

Email Address:

Foreign Limited Liability Company **Partners Construction LLC**

Certificate of Status	0		
Certified Copy	0		
Page Count	04		
Estimated Charge	\$125.00		

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

IN COMPLIANCE WITH SECTION 605,000, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TOTRANSACT BUSINESS IN THE STATE OF FLORIDA:

ARCONSCO LLC				
name unavailable, enter alternate	name adopted for the purpose of transacting business in H	erida Taci	alternate name attest meliude "Lamited Liability Company," (L.E. C.")	orm, LC iii
Alabama		3	85-2584669	
thirtsdiction under the law of s	institution under the law of which foreign limited liability company is organized. 3. 05-2504005 (FF) number, if a			
	(Date first transacted business in Horida, if prior to) (See sections 602-1900) A 605-0902, F.S. to determine	ne penalty) hability)	
4747 Woodmere Blvd.		,	7901 4th St N STE 300	
cet Address of Principal (Blice)		n,	(Viating Address)	
Montgomery Alabama 36106			St. Petersburg FL 33702	63
				ا - 2 الال
		-	· · · · · · · · · · · · · · · · · · ·	_2
Name and street addres	s of Florida registered agent: (P.O. Box	NOT a	ccentable)	골
	- •		·	<u>.</u>
	Northwest Registered Agent LLC			 ~2
Name:				යා
(M) 3 l.t	7901 4th St N STE 300			
Office Address.				
	St. Petersburg		, Florida 33702	
	(CRV)		(Zip cole)	

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.

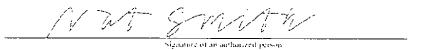
. 4.

8. For initial indexing purposes, list names, fitle 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 Capacit	t <u>v:</u>	Name and Address:
⊡Manager	Name: Crutchfield, Richard	□Manager	Name:	
iXMember	Address: 7901 4th St N STE 300	□Member	Address:	
DAmborized	St. Petersburg FL 33702	i ::Authorized		·
Paison		Person	·	
□ Other		COther		□Other
∐Munager	Name:	El Manager	Name:	·
[]Member	Address:	□Member	Address.	
□ Authorized		□ Amborized		<u>-</u> . <u></u>
Person		Person		·····
[]Other		COther		[]Other
L!Manager	Name:	L!Manager	Name:	
□Member	Address:	□Member		
□Authorized		CAuthorized		
Person		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.



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 Partners Construction LLC was formed in Montgomery County on August 13, 2020. The Alabama Entity Identification number for this entity is 000-643-088. I further certify that the records do not disclose that said entity has been dissolved, cancelled or terminated.



20240724000006266

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.

07/24/2024

Date

Wer Oll

Wes Allen

Secretary of State