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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

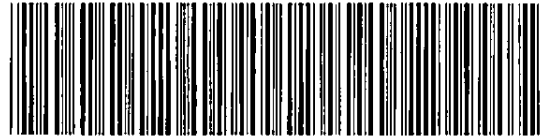
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** NEFCO SERVICE DIVISIONS 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:

Bonnie Weiler, Tax Manager  
\_\_\_\_\_

Name of Person

NEFCO Construction Supply LLC  
\_\_\_\_\_

Firm/Company

411 Burnham St.  
\_\_\_\_\_

Address

East Hartford, CT 06108  
\_\_\_\_\_

City/State and Zip Code

nefco\_tax@nfcocorp.com  
\_\_\_\_\_

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

For further information concerning this matter, please call:

Bonnie Weiler  
\_\_\_\_\_

Name of Contact Person

860  
\_\_\_\_\_

at ( \_\_\_\_\_ )  
Area Code

290-9044 ext. 10521  
\_\_\_\_\_

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

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. NEFCO SERVICE DIVISIONS, 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. CONNECTICUT  
(Jurisdiction under the law of which foreign limited liability company is organized)

3. 06-1420662  
(FEI number, if applicable)

4. July 1, 2024  
(Date first transacted business in Florida, if prior to registration.)  
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. NEFCO Service Divisions, LLC.  
(Street Address of Principal Office)

6. NEFCO Service Divisions LLC.  
(Mailing Address)

411 Burnham St.  
East Hartford, CT 06108

411 Burnham St.  
East Hartford, CT 06108

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)

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.

*Lisa DuBois*

Lisa Dubois

Assist Secretary

(Registered agent's signature)

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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]:

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

☒ Manager Name: NEFCO Construction Supply LLC

☐ Member Address: 411 Burnham Street

☐ Authorized East Hartford, CT 06108

Person \_\_\_\_\_

☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☐ Manager Name: Ron Cipriano

☐ Member Address: NEFCO Construction Supply LLC

☐ Authorized 411 Burnham St.

Person East Hartford, CT 06108

☒ Other Executive Vice President ☐ Other \_\_\_\_\_

☐ Manager Name: \_\_\_\_\_

☐ Member Address: \_\_\_\_\_

☐ Authorized \_\_\_\_\_

Person \_\_\_\_\_

☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

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

☐ Manager Name: Matthew Gelles

☐ Member Address: NEFCO Construction Supply LLC

☐ Authorized 411 Burnham St.

Person East Hartford, CT 06108

☒ Other President ☐ Other \_\_\_\_\_

☐ Manager Name: David Putt

☐ Member Address: NEFCO Construction Supply LLC

☐ Authorized 411 Burnham St.

Person East Hartford, CT 06108

☒ Other Treasurer ☐ 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.

*David Putt*

Signature of an authorized person

David Putt CFO

Typed or printed name of signer

# Secretary of the State of Connecticut Certificate of Legal Existence

Certificate of Legal Existence Certificate

Date Issued: Thursday, July 11, 2024 2:00 PM

I, the Connecticut Secretary of the State, and keeper of the seal thereof, do hereby certify, that the certificate of organization for the below domestic limited liability company was filed in this office.

A certificate of dissolution has not been filed, and so far, as indicated by the records of this office, such limited liability company is in existence.

## Business Details

Business Name NEFCO SERVICE DIVISIONS LLC

Business ALEI US-CT.BER:0297681

Formation Date 04/01/2022

## Name Change History

Filing Type	Filing Date	Previous Name	Updated Name
Certificate of Conversion	04/01/2022	L B ACQUISITION CORP.	NEFCO SERVICE DIVISIONS LLC



Secretary of the State

Business ALEI: US-CT.BER:0297681

Note: To verify this certificate, visit [Business.ct.gov](https://business.ct.gov)

Certificate Number: C-00136469