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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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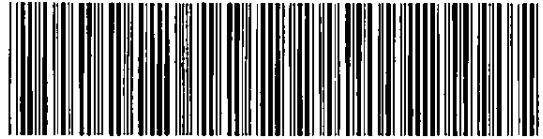
(Business Entity Name)

(Document Number)

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

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SEP 30 2024

2024 SEP 30 PM 12:50

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: QUADRANT CONSTRUCTORS, 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:

Bridget Clanton

\_\_\_\_\_  
Name of Person

Quadrant Constructors, LLC

\_\_\_\_\_  
Firm/Company

353 Marshall Avenue, Suite I

\_\_\_\_\_  
Address

St. Louis, MO 63119

\_\_\_\_\_  
City/State and Zip Code

bc@quadprop.com

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

For further information concerning this matter, please call:

Bridget Clanton

314

227-6050

at (\_\_\_\_\_) \_\_\_\_\_

\_\_\_\_\_  
Name of Contact Person

\_\_\_\_\_  
Area Code

\_\_\_\_\_  
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. Quadrant Constructors, 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. Missouri 3. 85-2204172  
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

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

5. 353 Marshall Avenue, Ste I 6. Same  
(Street Address of Principal Office) (Mailing Address)

St. Louis, MO 63119

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

Name: C T Corporation System  
Office Address: 1200 South Pine Island Road  
Plantation, Florida 33324  
(City) (Zip code)

2024 SEP 30 PM 12:49

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.



Christine Kelm  
Assistant Secretary

(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:**

☒ Manager Name: Rodney Jones  
☐ Member Address: 353 Marshall Avenue  
☐ Authorized St. Louis, MO 63119  
Person  
☐ Other ☐ Other

☐ Manager Name: Bridget Clanton  
☐ Member Address: 353 Marshall Avenue  
☒ Authorized St. Louis, MO 63119  
Person  
☐ Other ☐ Other

☐ Manager Name: Michaela Siress  
☐ Member Address: 353 Marshall Avenue  
☒ Authorized St. Louis, MO 63119  
Person  
☐ Other ☐ Other

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

☒ Manager Name: John Porta  
☐ Member Address: 353 Marshall Avenue  
☐ Authorized St. Louis, MO 63119  
Person  
☐ Other ☐ Other

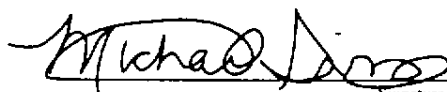
☐ Manager Name: Jeremy Torpea  
☐ Member Address: 353 Marshall Avenue  
☒ Authorized St. Louis, MO 63119  
Person  
☐ Other ☐ Other

☐ 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.



Signature of an authorized person

Michaela Siress

Typed or printed name of signer

# STATE OF MISSOURI



**John R. Ashcroft**  
**Secretary of State**

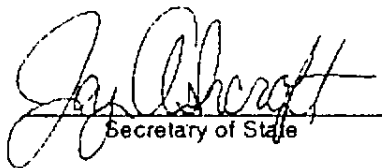
CORPORATION DIVISION  
CERTIFICATE OF GOOD STANDING

I, JOHN R. ASHCROFT, Secretary of State of the STATE OF MISSOURI, do hereby certify that the records in my office and in my care and custody reveal that

*QUADRANT CONSTRUCTORS, LLC*  
*LC1717183*

was created under the laws of this State on the 22nd day of June, 2020, and is active, having fully complied with all requirements of this office.

IN TESTIMONY WHEREOF, I hereunto set my hand and cause to be affixed the GREAT SEAL of the State of Missouri. Done at the City of Jefferson, this 11th day of September, 2024.

  
Secretary of State



Certification Number: CERT-09112024-0087