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DATE:

07/14/2025

NAME:

SUPERIOR STEEL SUPPLY LLC

TYPE OF FILING: APPLICATION

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AUTHORIZATION: ABBIE/PAUL HODGE

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 adopted for the purpose of transacting business in Flo	rida. The alternate name must include "Limited Liab	ility Company." "L.L.C," or "	LLC.")
Minnesota		3.		
(Jurisdiction under the law of v	which foreign limited liability company is organized)	(FEI number,	if applicable)	-
	(Date first transacted business in Florida, if prior to re (See sections 605.0904 & 605.0905, F.S. to determine	egistration.) o penalty linbility)	<u> </u>	
1155 Kelly Johnson B		1155 Kelly Johnson Blvd		
ect Address of Principal Office)		6. (Mailing Address)		-
Suite 400		Suite 400		
Colorado Springs, CO	80920	Colorado Springs, CO 80920		-
Name and street addre	ss of Florida registered agent: (P.O. Box	<u>NOT</u> acceptable)	202	_
Name:	Registered Agent Solutions, Inc.		5 JUL 1	ارخ.
Office Address:	2894 Remington Green Ln. Ste. A			
	Tallahassee	32308 , Florida	6: 0	
		, riorida		

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: SHARKBACS Management Group, Inc. Name: Chris Bennett ■ Manager □Manager Address: _ Address: 6593 113th Ave #3 □Member □Member Spicer, MN 56288 Colorado Springs, CO 80920-3959 □ Authorized Authorized Person 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: ____ \square 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. Nonindexed 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 Barnett, CFO

Typed or printed name of signee

Office of the Minnesota Secretary of State Certificate of Good Standing

1, Steve Simon, Secretary of State of Minnesota, do certify that: The business entity listed below was filed pursuant to the Minnesota Chapter listed below with the Office of the Secretary of State on the date listed below and that this business entity is registered to do business and is in good standing at the time this certificate is issued.

Name: Superior Steel Supply, LLC

Date Filed: 03/10/2000

File Number: 15591-LLC

Minnesota Statutes, Chapter: 322C

Home Jurisdiction: Minnesota

This certificate has been issued on: 07/11/2025

Steve Simon
Secretary of State
State of Minnesota