M250001120

(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						





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CSC - Tallahassee CSC 1201 Hays Street

Tallahassee, FL 32301-2607 850-558-1500, Ext: x62969

To: Department Of State, Division Of Corporations

From: Amanda Miller

Ext: x62969 Date: 08/06/25 Order #: 4139009-1

Re: Civil & Building North America 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: I20000000195

Lagran

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:

TO:	Registration Section Division of Corporations						
SUBJE	Civil & Building North Amer	ica LLC					
Name of Limited Liability Company							
		ted Liability Company for Authorization to Transact Business in Florida," Certificate of ter the above referenced foreign limited liability company to transact business in Florida					
Please 1	return all correspondence concerning	this matter to the following:					
	Jean-Pierre Margolin						
		Name of Person					
Civil & Building North America LLC							
		Firm/Company					
	2 S. Biscayne BLVD, Su	ite 2000					
		Address					
Miami, FL 33131							
	City/State and Zip Code						
	ebna@ebna-construction.u.	s					
	E-mail a	ddress: (to be used for future annual report notification)					
For furt	her information concerning this mat	ter, please call:					
	Jean-Pierre Margolin	305 632-2243 at ()					
	Name of Contact						
	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					

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. Civil & Building North	America LLC				
(Name of Foreign	Limited Liability Company; must include "Limited I	Jability	Company," "L.L.C.," or "LLC.")		_
(If name unavailable, enter alternate t	name adopted for the purpose of transacting business in Flori	da, The	alternate name must include "Limited Liability Compa-	ny," "L.L.C," or	"LLC.")
Delaware		2			
2. (Jurisdiction under the law of w	hich foreign limited liability company is organized)	3.	(FEI number, if applicable	cı	_
4					
	(Date first transacted business in Florida, if prior to rep (See sections 605.0904 & 605.0905, F.S. to determine	gistration penalty	.) liability)		
2. S. BISCAYNE BLV		_	2. S. BISCAYNE BLVD STE 200		
5. (Street Address of Principal Office)		O.	(Mailing Address)		_
MIAMI, FL 33131			MIAMI, FL 33131		
				<u> </u>	_ # .
7 Nome and street address	ss of Florida registered agent: (P.O. Box 1	SIOT 6	contable)	-1	127 137
7. Name and succe agures	or Florida registered agent. (F.O. 100x) i	<u>.101</u> 4	ссергаоге	PH	्दंद्रि
Name:	CORPORATION SERVICE COMPAN	Υ		1: 38	
Office Address:	1201 HAYS STREET				
	TALLAHASSEE		32301 , Florida		
	(City)		(Zip code)		
designated in this applica to comply with the provisi	tance: gistered agent and to accept service of pro- tion, I hereby accept the appointment as i ions of all statutes relative to the proper a s of my position as registered agent.	registe	red agent and agree to act in this cap	acity. I furt	ther agre
	(Registered agent's sig	nature)			

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: Title or Capacity: Name and Address: Name and Address: GIUSEPPE FOLCO Jean-Pierre Margolin ■ Manager Manager 3 cm Address: ____ Address: 2 S. BISCAYNE BLVD □Member □Member SUITE 2000 STE 2000 □ Authorized □ Authorized MIAMI, FL 33131 MIAMI, FL 33131 Person Person □Other____ □Other___ □Other Other______ Name: Vincent Avrillon Manager 2 S. BISCAYNE BLVD Address: ___ 2 S. BISCAYNE BLVD □ Member ☐ Member STE 2000 STE 2000 □ Authorized □ Authorized MIAMI, FL 33131 MIAMI, FL 33131 Person Person Other____ □Other_____ □Other □Other___ Name: ______ □Manager Name: □Manager ☐ Member Address: □Member Address: □ Authorized □Authorized Person Person □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. Jean-Pierre Margolin
Signature of an authorized person

Typed or printed name of signee

Jean-Pierre Margolin

Page 1

Delaware The First State

I, CHARUNI PATIBANDA-SANCHEZ, SECRETARY OF STATE OF THE STATE

OF DELAWARE, DO HEREBY CERTIFY "CIVIL & BUILDING NORTH AMERICA LLC"

IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN

GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF

THIS OFFICE SHOW, AS OF THE SEVENTH DAY OF AUGUST, A.D. 2025.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CIVIL & BUILDING NORTH AMERICA LLC" WAS FORMED ON THE SECOND DAY OF JANUARY, A.D. 2025.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN ASSESSED TO DATE.

Charuni Patibanda-Sanchez, Secretary of State

C. G. Sanchez

Authentication: 204412059

Date: 08-07-25

10047907 8300 SR# 20253600644