Dočument Number Only 100278 660 East Jefferson Street Requestor's Name Tallahassee: Florida 32301 Address (850) 222-1092 Phone City State Zip CORPORATION(S) NAME ****113.75 5000002787795----02/25/99--01093--012 ****285.00 ****285.00 () Profit () Amendment () Merger () NonProfit Limited Liability Company () Mark () Dissolution/Withdrawal () Foreign () Other () Annual Report () Limited Partnership () Change of R.A. () Fict. Filing () Reinstatement) UCC-1) Limited Liability Partnershi () Photo Copies Certified Copy () After 4:30 () Call if Problem () Cail When Ready Pick Up () Will Wait Waik in () Mail Out Please Return Extra Copy(s) Name Filed Stamp Availability Document Thanks, Melanie 👵 FEB 25 Examiner Updater 「智養SĂHA」」」AT Verifier Acknowledgmen SEEEBSE BH S: PL W.P. Verifier, GENIDIE

CR2E031 (1-89)

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

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

company is organized)				
(Date of Organization)	(Duration: Year limited liability of cease to exist or "perpetual")	company will		
upon qualification (Date first transacted business in Floridae) 619 Engineers Road, Belle Chasse,		and 817.155, F.S.)	
	lress of principal office)			
List name, title, and business address of each will manage the foreign limited liability comp	managing member [MGRM] o	r manager [MG mal page if nece	R] who essary)	
NAME & ADDRESS: TITLE:	NAME & ADDRESS:	TITLE:	99 FEB	NVISION SECRE
See 1 in Addendum			25	OF COR
			PH 3: 32	PORATIONS
	.			

9. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the Secretary of State or the proper official having custody of records in the state under the law of which it is organized. (A hotocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.)

AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS OF FOREIGN LIMITED LIABILITY COMPANY

I h	e undersigned member of authorized representative of a member of certifies:	All I de l'action	
1)	the above named limited liability company has at least two members;		
2)	the total amount of cash contributed by the member(s) is	\$2,000.00	<u> </u>
	if any, the agreed value of property other than cash contributed by member(s) is (A description of the property is attached and made a part hereto.)	\$;
4)	and the total amount of cash and property contributed and anticipated to be contributed by member(s) is (This total includes amounts from 2 and 3 above.)	\$2,000.00	 .
	Willia D Haffma		0
	Signature of a member of authorized representative of a member (In accordance with section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)	99 FEB 25	SECRETARY IVISION OF CO
	William D. Hoffman		OF STA
	Typed or printed name of signee	: ა ა	TIOH

Filing Fee: \$250.00 for Application and Affidavit

Addendum Bean Excavation L.L.C.

1. Name:

Bean Excavation Holding L.L.C.

Title:

MGRM

c.

619 Engineers Road, Belle Chasse, LA 70037

Name:

Stuyvesant Investments, Inc.

Title:

MGRM

c.

3525 N. Causeway Blvd., Suite 612, Metairie, LA 70002

SECRETARY OF STATE OIVISION OF CORPORATIONS

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1.	The name of the Limited Liability Company is:	
<u>Bea</u>	en Excavation L.L.C.	
2.	The name and the Florida street address of the registered agent and office are:	99 FT
	C T CORPORATION SYSTEM	FEB :
	(Name)	25 25
		PA NOON
	1200 South Pine Island Road	STAT ORAT
	Florida street address (P.O. Box NOT ACCEPTABLE)	TIONS 32
		2
	Plantation FL 33324	••
	(City/State/Zip)	
1		
Hovin	g been named as registered agent and to accept service of process for the above s	tated limited
liabili	ty company at the place designated in this certificate, I hereby accept the appoint and agree to act in this capacity. I further agree to comply with the provisions o	ment as registered
relatii	and agree to act in this capacity. I further agree to comply with the provisions of ng to the proper and complete performance of my duties, and I am familiar with an ations of my position as registered agent.	id accept the
_	CORPORATION SYSTEM	
1	luto Allam	±
	(Signature)	-
Victo	or Alfano/Asst. Secretary	

Filing Fee: \$35 for Designation of Registered Agent

. State of Delaware

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Office of the Secretary of State

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "BEAN EXCAVATION L.L.C." 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 NINETEENTH DAY OF FEBRUARY, A.D. 1999.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

Edward J. Freel, Secretary of State

AUTHENTICATION:

9585740

991065629

3006883

DATE:

02-19-99