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SECRETARY OF STATE DIVISION OF CORPORATIONS

#### **COVER LETTER**

Registration Section
Division of Corporations

TO:

SUBJECT: Alumihum Fahr (Name of Lim	ited Liability Company)
The enclosed "Application by Foreign Limited Lia	ability Company for Authorization to Transact Business in abmitted to register the above referenced foreign limited
Please return all correspondence concerning this n	, -
Thomas Gib	h S ame of Person)
Aluminum Fabr	rications LLC ==
_	RECOMPANY)  APR -2 AM 11: 34  (Address)  APR -2 AM 11: 34
	tate and Zip Code)
For further information concerning this matter, ple	
Thomas Gibbs (Name of Person)	at (321) 574-0964 (Area Code & Daytime Telephone Number)
MAILING ADDRESS: Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	STREET ADDRESS: Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301
Enclosed is a check for the following amount:  \$\Boxed{125.00} \text{Filing Fee} \tag{\$130.00} \text{Filing Fee & Certificate o}\$	

### 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:
1. A / Uminum Fabricators L-C (Name of Foreign Limited Liability Company)
2. Deleware USA (Jurisdiction under the law of which foreign limited liability company is organized)  3. FEI number, if applicable)
4. Ol-19-2007 (Date of Organization)  5. Perpetual (Duration: Year limited flability company will cease to exist or "perpetual")
6(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)
7 35A The Commans, 3524 Silverside Rd
7. 35A The Commans, 3524 Silversiole Rd Wilmington, De. 1810 Newcastle County (Street Address of Principal Office)
8. If limited liability company is a manager-managed company, check here
9. The name and usual business addresses of the managing members or managers are as follows: 9
Thomas Gibbs
150 Natalie Circle NW " SE
Palm Bay, F1. 32-907 = 35
10. Attached is an original 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. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.)
11. Nature of business or purposes to be conducted or promoted in Florida: Aum in a Pool
Enclosures, Screening Soffits Gutters, Screen Rooms
Signature of a member or an authorized representative of a member.
(In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)
Gibbs
Typed or printed name of signee

## 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:  Aluminum FABricators, LUC	
2. The name and the Florida street address of the registered agent and office are:	
Thomas in Gibbs	SECRE DIVISION <b>07 APR</b>
Florida Street Address (P.O. Bok NOT ACCEPTABLE)	FILED TARY OF S OF CORPOR
Palm Bary FL 32907 City/State/Zip	TATE RATIONS

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 certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, Florida Statutes.

(Signature)

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

## Delaware

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#### The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ALUMINUM FABRICATORS, 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 TWENTY-SIXTH DAY OF MARCH, A.D. 2007.

OT APR -2 AMII: 3L



4288710 8300 070352782 Darriet Smith Hindson

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 5535819

DATE: 03-26-07