MAD0007-108

(R	equestor's Name)						
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PICK-UP	WAIT MAIL						
(B	Susiness Entity Name)						
(Document Number)							
Certified Copies	Certificates of Status						
Special Instructions to Filing Officer:							





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COVER LETTER

TO:

	vision of Corporations						
SUBJECT:	WEATHER TECH ROOFING LLC						
	Name of Limited Liability Company						
The enclose Existence, a	ed "Application by Foreign Limited L and check are submitted to register the	iability Company for Authorization to Transact Business in Florida," Certificate of above referenced foreign limited liability company to transact business in Florida					
Please retur	n all correspondence concerning this	matter to the following:					
	WAYNE GRIFFITH						
	· · · · · · · · · · · · · · · · · · ·	Name of Person					
	WEATHER TECH ROOFING	G. LLC					
		Firm/Company					
	29701 COUNTY TOAD 112						
		Address					
	ROBERTSDALE, ALABAMA	A 36567					
		City/State and Zip Code					
	W.SYNERGYHOMES@GMAI	L.COM					
	E-mail addres	ss: (to be used for future annual report notification)					
For further	information concerning this matter, p	lease call:					
WAYNE GRIFFITH		at ()					
	Name of Contact Perso						
Re	ailing Address: egistration Section ivision of Corporations	Street Address: Registration Section Division of Corporations					
P.	O. Box 6327	The Centre of Tallahassee					
Ta	allahassee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303					
Pl€	iclosed is a check for the following an ease make check payable to: FLORII \$125.00 Filing Fee \$130.00 F Cert	DA DEPARTMENT OF STATE					

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

IN COMPLIANCE WITH SECTI	ON 605.0902, FLORIDA STA	TUTES THE FOLLOWE	NG IS SUBNITTED T	O REGISTER A I	ORĐGY LIMITED LIABILII
COMPANYTOTRANSACTBLS WEATHER TECH ROO		ONLE			
Name of Foreign Li	mited Liability Company, mus	t include "Limited Liability	Company, L.L.C.,	or LLC.	
WEATHER TECH ROOF	NG OF FLORIDA, LLC				•
(If name unavailable, enter alternate nat	ne adopted for the purpose of trans-	acting business in Florida. The	alternate name must inclu	de "Limited Liability	Company," T. L.C." or "LLC.")
BALDWIN COUNTY, A	•	•			
2. (Jarridiction under the law of whi	y is organized) .	 	(FEI number, if applicable)		
,	_		•	,	
4 .				·	-
	(Date first transacted business (See sections 605,0904 & 605	n Florida, if prior to registratio 0905, F.S. to determine penalty	n) hability)		
29701 COUNTY ROA	D 112		SAME		
5. (Screet Address of Principal Office)		6.	(Mailing Address)	
ROBERTSDALE, ALA	RAMA 36567		•		
KOBER ISDALE, ALA					•
•			٠,		
		—			
7. Name and street address					•
Name:	LARRY DAVID FOSI	HEE, JK			
Office Address:	8452 ALTA VISTA D	RIVE	. .		
•	PENSACOLA	•		32526	
		(Çııy)	, Florida	(Zrp code)	
,	•				
Registered agent's acception to the leading been named as red designated in this application comply with the provision of the provision of the leading to th	rgistered agent and to ac ution, I hereby accept the tions of all statutes relati	e appointment as regi- ve to the proper and c			
and accept the obligation	is of my position as regis	ierea ageni.			* *
	Hour D:	tosk-A	<u> </u>	<u> </u>	<u> </u>
100	/1-	(Registered ages 's spante	•>	, .	
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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]: Name and Address: Name and Address: Title or Capacity: Title or Capacity: Name: WAYNE GRIFFITH □Manager Name: _____ □Manager 29701 COUNTY ROAD 112 □ Member Address: □Member Address: ROBERTSDALE, ALABAMA 36567 □ Authorized □ Authorized Person Person **■**Other_AMBR □Other Other □Other ____ Name: DENNIS GRIFFITH Name: _____ □Manager □ Manager Address: 30566 DUCK POND ROAD Address: _____ □Member □Member ROBERTSDALE, ALABAMA 36567 □ Authorized □ Authorized Person Person ■Other_AMBR □Other_____ □Other____ Other____ Name: __ LARRY DAVID FOSHEE, JR Name: _____ □Manager □ Manager Address: 8452 ALTA VISTA DRIVE Address: □ Member □Member PENSACOLA, FLORIDA 32526 □ Authorized □ Authorized Person Person ■Other_AMBR □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. Signature of an authorized person WAYNE GRIFFITH

Typed or printed name of signee

John H. Merrill Secretary of State APR 1 3 2022

BY:

P.O. Box 5616 Montgomery, AL 36103-5616

STATE OF ALABAMA

I, John H. Merrill, Secretary of State of Alabama, having custody of the Great and Principal Seal of said State, do hereby certify that

pursuant to the provisions of Title 10A, Chapter 1, Article 5, Code of Alabama 1975, and upon an examination of the entity records on file in this office, the following entity name is reserved as available:

Weather Tech Roofing LLC

This name reservation is for the exclusive use of Wayne Griffith, 29701 County Road 112, Robertsdale, AL 36567 for a period of one year beginning March 11, 2022 and expiring March 11, 2023



RES009197

In Testimony Whereof, I have hereunto set my hand and affixed the Great Seal of the State, at the Capitol, in the city of Montgomery, on this day.

March 11, 2022

Date

X 1. Menill

John H. Merrill

Secretary of State