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### STREET ADDRESS:

4.18(3)E1

Qualification/Tax Lien Section Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399

### MAILING ADDRESS:

Qualification/Tax Lien Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 O AUG -2 AM 9: 3

Enclosed is a check for the following amount:

☐ \$70.00 Filing Fee

S78.75 Filing Fee & Certified Copy

☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy

# APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. Algoma Door, Inc.	
(Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)	* • •
2. Wisconsin	
(State or country under the law of which it is incorporated)  3. 36-4316700  (FEI number, if applicable)	
4. 9/14/99 5. Perpetual (Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")	ž +
6July 1, 2000	
6. July 1, 2000  (Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)	
7506 Municipal Avenue	
Jofforgen Gitter Tra	:
Jefferson City, TN 37760 (Current mailing address)	17+
(Current mailing address)	
8. Light Manufacturing and Distribution of Commercial Wood Doors.  (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)  9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)  Name: Anthony Grady  Office Address: 7630 Currency Drive  Orlando , Florida, 32809 (Zip code)	
10. Registered agent's acceptance:  Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.  [Mathematical Registered agent's Agnature]	ř.
C Grand Division (C)	

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and addresses of officers and/or directors: (Street address ONLY - P.O. Box NOT acceptable)

A. DIRECTO	ORS (Street address only - P.O. Box NOT acceptable)	
Chairman:	Wendell E. Ellsworth	
Address:	1001 Perry Street	<del></del>
<del>.,,</del>	Algoma, WI 54201	
Vice Chairman	1:	
Address:		
		<del></del>
Director:	Harry E. Foglesong	
Address:	506 Municipal Avenue	
	Jefferson City, TN 37760	
Director:	Roderick J. Roe	<del></del>
Address:	506 Municipal Avenue	
	Jefferson City, TN 37760	
B. OFFICE	RS (Street address only - P.O. Box NOT acceptable)	
President:	Wendell E. Ellsworth	
Address:	see above	<del></del>
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Vice President	t: Harry E. Foglesong	<del></del>
Address:	see above	
	P.S. C	<u> </u>
Secretary:		<u>ה</u>
Address:	see above	
Treasurer:	Roderick J. Roe	
Address:	see above	
<del></del>		
NOTE: If ne	ecessary, you may attach an addendum to the application listing additional officers and/or directors.	
13	Rode Joe	· · · · · · · · · · · · · · · · · · ·
	Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)	
14.	Roderick J. Roe Secretary/Treasurer  (Typed or printed name and capacity of person signing application)	* 2

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## United States of America

## State of Wisconsin



# DEPARTMENT OF FINANCIAL INSTITUTIONS

To All to Whom These Presents Shall Come, Greeting:

I, RAY ALLEN, Administrator, Division of Corporate & Consumer Services, Department of Financial Institutions, do hereby certify that

# ALGOMA DOOR, INC.

is a domestic corporation organized under the laws of this state and that its date of incorporation is September 14, 1999.

I further certify that that said corporation has not yet completed its initial report year and, accordingly, has not yet filed an annual report under ss. 180.1622, 180.1921 or 181.1622, Wis. Stats.; and that said corporation has not filed articles of dissolution.

Tinancia Indiana

IN TESTIMONY WHEREOF Thave hereunto set my hand and affixed the official seal of the Department on 30 Jun 2000.

RAY ALLEN, Administrator

Division of Corporate & Consumer Services

Department of Financial Institutions

BY:

Effective July 1, 1996, the Department of Financial Institutions assumed the functions previously performed by the Corporations Division of the Secretary of State and is the successor custodian of corporate records formerly held by the Secretary of State.