## F04000005357

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



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J. BRYAN SEP 2 1 2004

## TRANSMITTAL LETTER

|  | Registration Section<br>Division of Corpora                              | tions                                    | $\bigcirc$           |                           |   |                         |  |
|--|--|--|----------------------|---------------------------|---|-------------------------|--|
| SUBJE  | CT: 5 H  | ELTER (Name of c                         | Koo                  | FING,                     | INC.  |                         |  |
|  |  | (Name of c                               | orporation           | - must inc                | lude suffix)                                  |                         |  |
| Dear Sir   | or Madam:  |  |                      |                           |   |                         |  |
| "Certific  | osed "Application bate of Existence," a business in Florida.             |  |                      |                           |   |                         |  |
| Please re  | turn all corresponde   | ence concerning th                       | is matter t          | to the follo              | wing:   | c                       |  |
| R  | RENDA F  | 7111 -                                   |                      |                           |   | ري<br>د د مي<br>موسود   |  |
|  | CENBA 1  | (RN)                                     | Name of l            | Person)                   |   | <del></del>             | 20 (                                   |
| <  | )<br>//= . = a   | Rasina                                   |                      |                           |   |                         | The second                             |
|  | HELTER.  | 1100 FAUG                                | Firm/Con             | npany)                    |   |                         | ************************************** |
|  |  |  |                      | • • •                     |   |                         | 7777                                   |
| (0   | 804 L  | ov ingto.                                | <u>U ←</u><br>(Addre |                           | <del></del>                                   |                         | - 36 °                                 |
| •  |  |  |                      |                           |   |                         | 75                                     |
| $\frac{DALLAS}{DALLAS} \frac{TX}{TX} \frac{75252}{\text{(City/State and Zip code)}}$ |  |  |                      |                           |   |                         |  |
|  | ·  | (CI                                      | ty/State at          | ia vib coa                | =)  |                         |  |
| For furth  | er information conc  | erning this matter                       | , please ca          | 11:                       |   |                         |  |
| Bei  | ENDA ARN<br>(Name of Person)   | DT CPA at (                              | 972                  | 86                        | 7 - 8 //                                      | one Number)             |  |
|  | (Name of Person)   |  | (Mea C               | oue & Day                 | time releph                                   | one Number)             |  |
| )<br>]   | STREET ADDRES Registration Section Division of Corpora 409 E. Gaines St. | <u>.</u>                                 |                      | R<br>D<br>P.              | AILING Allegistration Sivision of Co. Box 632 | ection<br>orporations   |  |
| -  | Tallahassee, FL 32399 Tallahassee, FL 32314                              |  |                      |                           |   |                         |  |
| Enclosed   | l is a check for the f   | following amount:                        |                      |                           |   |                         |  |
| \$70.0   | 0 Filing Fee   | \$78.75 Filing Fee<br>Certificate of Sta |                      | \$78.75 Fill<br>Certified |   | S87.50 F. Certification | ite of Status &                        |

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

| IN COMPLIANCE<br>REGISTER A FOR | E WITH SECTION 607.1503, FLORIDA S<br>REIGN CORPORATION TO TRANSACT     | STATUTES, THE FOLLOWING IS SUBMITTED TO BUSINESS IN THE STATE OF FLORIDA   |
|---------------------------------|---|--|
|                                 | FIER ROOFING TA   | بالم عند المسلم الم   |
| (Enter name of c                | corporation; must include "INCORPORATED corp," "Inc," "Co," or "Corp.") | ," "COMPANY," "CORPORATION,"   |
| (If name unavail                | able in Florida, enter alternate corporate name                         | e adopted for the purpose of transacting business in Florida   |
| 2. TEXA                         | under the law of which it is incorporated)                              | 05-05666 14  |
|                                 |   | · · · · · · · · · · · · · · · · · · ·  |
| 1. <u>HPRI</u>                  | <u> </u>  | PERPETUAL (Duration: Year corp. will cease to exist or "perpetual")  |
|                                 |   |  |
| s. <u>Upon</u>                  | Qualification (Date first transacted business i                         |  |
| ,                               | (Date first transacted business i                                       | in Florida, if prior to registration)  |
| 10                              | (SEE SECTIONS 607,1301 & 607.1.   | 502, F.S., to determine penalty liability)   |
| 7. <u>68</u> 0                  | 14 LOVINGTON L  | DR DALLAS, 1X 1323   |
|                                 | (Principal office add   | iress)   |
| 680                             | 4 LOVINGTON DE  | DR DALLAS, TX 7525  DALLAS, TX 75252  dress)   |
|                                 | (Current maning add   | ness)  |
| 0                               |   |  |
| 3                               | OF/NG s) of corporation authorized in home state or co                  | control of the contro |
| (rurpose(s                      | of corporation authorized in noine state of co                          | bunity to be carried out in state of Florida)  |
| . Name and stree                | et address of Florida registered agent: (P.C                            | D. Box <u>NOT</u> acceptable)  |
| Name:                           | C T Corporation System  |  |
| Office Address:                 | 1200 South Pine Island Road   | <u></u>  |
|                                 | Plantation  | , Florida <u>33324</u>   |
|                                 | (City)  | (Zip code)   |
|                                 |   |  |
| •                               | gent's acceptance:  | to a formation for the other states.   |
| Having been nam                 | ea as registerea agent ana to accept servi                              | ice of process for the above stated corporation at the pl  |

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.

By: Michael E. Jones

(Registered agent's signature) Assistant Secretary

- 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 business addresses of officers and/or directors:

| A. DIRECTORS  |          |
|---|----------|
| PIRECTOR RANDY L. REAMS   |          |
| Address:  |          |
| STRATFORD, OK 74872   |          |
| DIRECTOR CHRIS A. REAMS   |          |
| Address.  | چ        |
|   | · ·<br>— |
| Director: CHRIS E MARSH   | _@       |
| Address: 717 CALIFORNIA   | <u>.</u> |
| Director: CHRIS E. MARSH  717 CALIFORNIA  KELLED, TX 76248  |          |
| Director:   |          |
| Address:  |          |
|   |          |
| B. OFFICERS   |          |
| President: CHRIS A. REAMS   |          |
| Address: 13306 Ming Heights De<br>SAN ANTONIO, TX 78230   |          |
| SAN ANTONIO TX 78230  |          |
| Vice President: TERRI L. REAMS  |          |
| Address: P.O. 130x 582  |          |
| STRATFORD OK 74872  |          |
| Secretary: RANDY L. REAMS   |          |
| Address: PO. Box 582 STRATFORD, OK 74872  |          |
| Treasurer: RANNY L. REAMS   |          |
| Address: RAW Dy L. REAM S  Address: P.D. Box 582 STRATFORD OK 14872   |          |
|   |          |
| NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. |          |
| 13. (Signature of Director or Officer listed in number 12 of the application)                                   |          |
| 14. RANDY L. REAMS DIRECTOR SECRETARY (Typed or printed name and capacity of person signing application)        |          |
| (Typed or printed name and capacity of person signing application)  |          |

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ADDENDUM TO APPLICATION BY FOREIGHT CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

ADDITIONAL OFFICER:

Chief Financial Officer CHRIS E. MARSH

Address 717 CALIFORNIA

KELLER TX 76248

TOWN SEP 20 PM 3: 18

Corporations Section P.O.Box 13697 Austin, Texas 78711-3697 Geoffrey S. Connor Secretary of State



## Office of the Secretary of State

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Articles of Incorporation for SHELTER ROOFING, INC. (filing number: 800198126), a Domestic Business Corporation, was filed in this office on April 29, 2003.

It is further certified that the entity status in Texas is active.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on September 09, 2004.



