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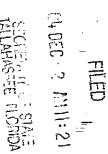
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
, ,
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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Office Use Only



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TRANSMITTAL LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Shelterguard Roofing Systems Inc.	
(Name of corporation - must include suffix)	
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," and check are submitted to register the above referenced foreign corporation to transact business in Florida.	
Please return all correspondence concerning this matter to the following:	
Mark A. Lipscomb	
(Name of Person)	-
Shelterguard Roofing Systems Inc.	
(Firm/Company)	-;
3808 Mogadore Rd.	
(Address)	•
Mogadore, Ohio 44260	
(City/State and Zip code)	•
For further information concerning this matter, please call: LulaBelle Lowe at (330) 628-7452	
(Name of Person) (Area Code & Daytime Telephone Number)	הורנה
For further information concerning this matter, please call: LulaBelle Lowe at (330) 628-7452 (Name of Person) (Area Code & Daytime Telephone Number)	=======================================
Registration Section Registration Section	
Division of Corporations 409 E. Gaines St. Division of Corporations P.O. Box 6327	
Tallahassee, FL 32399 Tallahassee, FL 32314	
Enclosed is a check for the following amount:	
☐ \$70.00 Filing Fee ☐ \$78.75 Filing Fee & ☐ \$78.75 Filing Fee & ☐ \$78.75 Filing Fee & ☐ \$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.

	"Inc.," "Co.," "Corp," "I	ne," 'Co," or "Corp.")							
	Shelterguard Roofing			<u>_</u>				<u>. </u>	٠,
	(If name unavailable in l	Florida, enter alternate corpora	te nam	e adopted for t	the purpos	se of transacting bus	iness in Flor	ida)	
2.	Ohio	,USA	3		3	34-1951548			
	(State or country under the	,USA ne law of which it is incorporat	ed)		(FEI r	number, if applicable	3)		·
4.	10/20	00	5			10/2010			_
	(Date of inco	rporation)		(Duration:	Year corp	10/2010 o. will cease to exist	or "perpetua	al")	·
6.		N/A							
٥.		(Date first transacted but (SEE SECTIONS 607.1501 &							
7.	3808 Mogadore Rd.	Mogadore, Ohio 44260							
•		(Principal of	fice ad	dress)					
	2525 Carmel Rd.	Indialantic, Fla 32903							
		(Current mai	ling ad	dress)					
8.	Residential Roofing	/ Installed Sales							
٥.		poration authorized in home st	ate or o	country to be c	arried out	in state of Florida)			-
9.	Name and street addre	ss of Florida registered age	nt: (P.	O. Box NO	<u>Γ</u> accepta	ble)	SELLA	OH DEC	- :
	Name:	Dorothy Delaney		_ 			是当	C	-11 ,
0:	ffice Address:	2525 Carmel Rd.		<u></u>	7.	्रक् षा च्या १ ३ ०	SSE C	2 MM11:2	
		Indialantic		Flori	ida		문설		
		(City)		, Flori	(Zip	code)	종	2	
10	Domintowed amountly						, 1 -x		
). Registered agent's : aving been named as r	acceptance: egistered agent and to acce	nt seri	vice of proces	ss for the	above stated corn	oration at	the nia	ice
đe	esignated in this applic	ation, I hereby accept the a	ppoin	tment as regi	istered ag	gent and agree to t	act in this c	capacit	y. I
		with the provisions of all st and accept the obligations of					formance (of my a	luties,
47	ia ramjamuiar wiin a	na accept the obligations of	, nty b	osmon us re	gisteren t	igeni.			
		Orothy Dela (Registered agent's sig	neu	<u> </u>					
	· — - 7	(Registered agent's sig	gnature	2)					

- 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. DIRE	CTORS	
Chairman:	Mark A. Lipscomb	<u>-</u>
Address:	4094 Sunrise Blvd. S. Mogadore, Ohio 44260	J.S
	Mogadore,Ohio 44260	<u></u>
Vice Chair	man: Dawn R. Lipscomb	<u> </u>
Address: _	4094 Sunrise Blvd. S.	_
_	Mogadore, Ohio 44260	<u></u>
Director: _	Luía Belle Lowe	
Address: _	626 Woodstock Rd.	
_	Akron, Ohio 44312	_
Director:	Dawn R. Lipscomb	<u> </u>
Address: _	4094 Sunrise Blvd. S.	_
_	Mogadore, Ohio 44260	_
B. OFFI	CERS	
President:	Mark A. Lipscomb	
Address: _	4094 Sunrise Blvd. S.	_
	Mogadore, Ohio 44260	_
Vice Presid	lent:	
Address: _		
_	H _C ?	; —
Secretary:	Mark A. Lipscomb	_
Address: _	4094 Sunrise Blvd. S. Mogadore, Ohio 44260	<u>.</u> ,
Treasurer:	Mark A. Lipscomb	<u>:</u>
Address: _	4094 Sunrise Blvd. S. Mogadore, Ohio 44260	<u>.</u>
	f 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)	<u>.</u> .
14.	Mark A. Lipscomb / President	

(Typed or printed name and capacity of person signing application)

United States of America State of Ohio Office of the Secretary of State

I, J. Kenneth Blackwell, do hereby certify that I am the duly elected, qualified and present acting Secretary of State for the State of Ohio, and as such have custody of the records of Ohio and Foreign corporations; that said records show SHELTERGUARD ROOFING SYSTEMS INC., an Ohio corporation, Charter No. 1181413, having its principal location in Mogadore, County of Summit, was incorporated on August 25, 2000 and is currently in GOOD STANDING upon the records of this office.



Witness my hand and the seal of the Secretary of State at Columbus, Ohio this 24th day of November, A.D. 2004

Ohio Secretary of State

Validation Number: V2004328N5AA5B