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COVER LETTER

TO: Registration S Division of Co			
SUBJECT: RG	GIONA DRYWA (Name of corpo	11 of Missi	ssippi INC.
	(Name of corpo	ration - must include suffix)	
Dear Sir or Madam:			
	ation by Foreign Corporation ce," and check are submitted orida.		
Please return all corres	spondence concerning this m	atter to the following:	
Re	BECCA K. Man	na le	
	(Nam	ne of Person)	
Ret	ional ORYWA),	1 of Mississ	ipai INC.
	(Firm	n/Company)	7)
221	Highland M	EADOW ROAD	74 S 7
	(1	Address)	LAGE CT
Flo	RA MS 392 (City/Si	27.1	22
	(City/Si	tate and Zip code)	E .
			TO T
For further information	n concerning this matter, plea	ase call:	至 55
ρ.	11		, P
KEBECCA K.	$\frac{Mo_A c}{son}$ at $\frac{60}{A}$)) P29-9556	,
(Name of Per	son) (A	rea Code & Daytime Teleph	one Number)
Registration S Division of Co Clifton Buildi 2661 Executiv	orporations ng ve Center Circle	MAILING A Registration S Division of Co P.O. Box 632 Tallahassee, F	lection orporations 7
Tallahassee, F	L 32301		
Enclosed is a check fo	r the following amount:		
☑\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	☐ \$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certificate of Status & Certified Copy

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

1. Register A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA 1. Register A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp." "Inc.," "Co.," or "Corp.")		
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business.)	ŕ	
2. MS USA 3. 20-2210527 (State or country under the law of which it is incorporated) (FEI number, if applicable)		
(State or country under the law of which it is incorporated) (Fig number, it applicable)		
4. 1/10/05 5. 2/04 (Duration: Year corp. will cease to exist or		
(Date of incorporation) (Duration: Year corp. will cease to exist or	"perpetual")	
6,		
(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)		
7. 221 Wighland MEADOW RD Flora M5 3907 (Principal office address)	1	
(Principal office address)	77.0	
	550	COLUMN TO SERVE
(Current mailing address)		
(Surani maning accioss)	As N	- constant
8. ORYWoll Installation (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)	SEE TO	
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)	£[0]	
9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)	PH 1:55	· · STARE
Name: C. T. CORPORATION SUSTEMS	➣	
Name: <u>C. T. Corporation Sustems</u> Office Address: <u>1200 S. Pine Island RD.</u> <u>Plantation</u> , Florida <u>33324</u> (City) (Zip code)		
Plantaria Plania 223211		
(City), righted 33327		
(Exp code)		
10. Registered agent's acceptance: Having been named as registered agent and to accept service of process for the above stated corpor designated in this application, I hereby accept the appointment as registered agent and agree to act further agree to comply with the provisions of all statutes relative to the proper and complete perfor and I am familiar with and accept the obligations of my position as registered agent.	t in this capac	άν. Ι
PETER F. SOUZA ASSISTANT SECRETARY		
(Registered agent's signature)		

- 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 Chairman: Address: _ Vice Chairman: Address: _ Address: Director: Address: **B. OFFICERS** President: REBECCA K. MOAK Address: 221 High/OND MEADOW RD. Flora MS 39071 Vice President: DWAYNE MOAK Address: 221 Nighland MEADOW RD. Flora Ms 39071 Address: ZZI Highland MEADOW RO. FloRA, NS 3907) Address: 221 Hyph/and Muadan RD., Flora, Ms 3907/ NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. (Signature of Director or Officer listed in number 12 of the application) REBECCA K. MOAK PRESIDENT (Typed or printed name and capacity of person signing application)

State of Mississippi

Office of the Secretary of State Eric Clark, Secretary of State Jackson, Mississippi

CERTIFICATE

I, ERIC CLARK, Secretary of State of the State of Mississippi, and as such, the legal custodian of the corporate records, required by the laws of Mississippi, to be filed in my office, do hereby certify:

That on January 10, 2005, the State of Mississippi issued a Charter/Certificate of Authority to:

REGIONAL DRYWALL OF MISSISSIPPI, INC.

That the state of incorporation is MISSISSIPPI.

That the period of duration is 99 years.

That according to the records of this office, Articles of Dissolution or a Certificate of William Plane not been filed.

That according to the records of this office, a current Annual Report has been delivered to the Office of the Secretary of State.

I further certify that all fees, taxes and penalties owed to this state, as reflected in the records of the Secretary of State, have been paid and that the corporation is in existence or has authority to transact business in Mississippi.



Given under my hand and seal of office October 4, 2005

ric Clark

ERIC CLARK Secretary of State

Certification Number: 7447604-2 Page 1 of 1 Reference: Dwayne Moak (vs) Verify this certificate online at http://www.sos.state.ms.us/busserv/corp/verify