## F090000000 718

| (Re                                     | questor's Name)   |           |
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| (Add                                    | dress)            |           |
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| (City                                   | y/State/Zip/Phone | e #)      |
| PICK-UP                                 | WAIT              | MAIL .    |
| (Bu                                     | siness Entity Nan | ne)       |
| (Document Number)                       |                   |           |
| Certified Copies                        | Certificates      | of Status |
| Special Instructions to Filing Officer. |                   |           |
|   |                   |           |
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| ·                                       |                   |           |

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FEB 24 2009 D. A. WHITE SECRETARY OF STATE
TALLAHASSEE, FLORIC

FILED

## **COVER LETTER**

| TO: New Filing Section Division of Corporations   |  |  |
|---|--|--|
| SUBJECT: Bloom Roofing Systems, Inc.  (Name of corporation - must include suffix)   |  |  |
|   |  |  |
| ., , , ,  | ion for Authorization to Transact Business in Florida," tted to register the above referenced foreign corporation to |  |
| Please return all correspondence concerning this  | s matter to the following:   |  |
| Mark Schneider  | ·  |  |
| ()  | Name of Person)  |  |
| Bloom Roofing Systems, Inc.   |  |  |
| (F  | 'irm/Company)  |  |
| 12238 Emerson Drive   |  |  |
|   | (Address)  |  |
| Brighton MI 48116   |  |  |
| (City   | y/State and Zip code)  |  |
| For further information concerning this matter, p   | please call:   |  |
| Denise Curtis at (  | 248 ) 264-7200   |  |
| (Name of Person)  | (Area Code & Daytime Telephone Number)   |  |
|   |  |  |
| STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 | MAILING ADDRESS: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314                     |  |
| Enclosed is a check for the following amount:   |  |  |
| \$70.00 Filing Fee \$78.75 Filing Fee & Certificate of Statu  |  |  |

## 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.

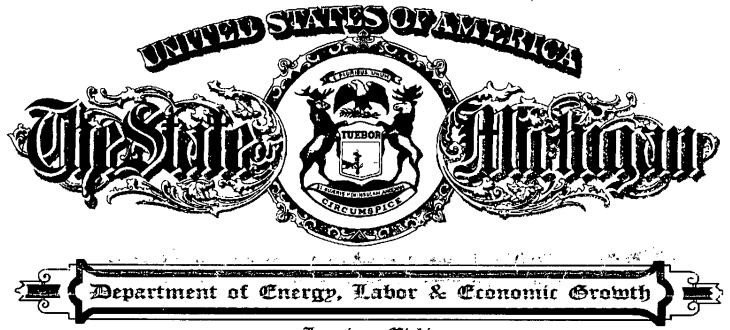
| (Enter name of c  | cofing Systems, Inc. corporation; must include "INCORPORATED Corp," "Inc," "Co," or "Corp.") | ," "COMPANY," "CORPORATION,"   |
|---|--|--|
| Bloom Ro  | ofing Systems, Inc.  |  |
| (If name unavail  | able in Florida, enter alternate corporate name  | e adopted for the purpose of transacting business in Florida)  |
| <sub>2.</sub> Michigan <sub>3.</sub>                        |  | 38-2353221   |
|   | under the law of which it is incorporated)   | (FEI number, if applicable)  |
| 4. Michigan   | 5-15-81 5  | Perpetual  |
|   | e of incorporation)  | (Duration: Year corp. will cease to exist or "perpetual")  |
| 6.  |  | 7 13   |
|   |  | in Florida, if prior to registration)  502, F.S., to determine penalty liability   |
| <sub>7</sub> 12238 Em                                       | erson Drive, Brighton, MI 48   | 3116   |
|   | (Principal office add  | dress)   |
| 12238 Em  | erson Drive, Brighton, MI 48   | 3116 THE TO  |
|   | (Current mailing ad  | dress)   |
| <sub>s</sub> Commerc  | ial Roofing  | PATE SA  |
| ·   | s) of corporation authorized in home state or c  | country to be carried out in state of Florida)   |
| 9. Name and stree   | et address of Florida registered agent: (P.  | O. Box NOT acceptable)   |
| Name:   | Thomas Bloom   |  |
| Office Address:   | 5592 Avenida Pescadora   |  |
|   | Ft. Myers Beach  | , Florida 33931  |
|   | (City)   | (Zip code)   |
| 10 Registered as  | gent's acceptance:   |  |
| Having been nam<br>designated in this<br>further agree to c | ned as registered agent and to accept serv<br>application, I hereby accept the appoint       | rice of process for the above stated corporation at the place<br>ment as registered agent and agree to act in this capacity. I<br>relative to the proper and complete performance of my duties<br>osition as registered agent. |
|   | L.BL   |  |

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.

(Registered agent's signature)

12. Names and business addresses of officers and/or directors: FILED A. DIRECTORS Chairman: Thomas Bloom Address: 12338 Emerson Drive Brighton MI 48116 Vice Chairman: Address: \_\_\_\_\_ Director: Address: \_\_ **B. OFFICERS** President: Kyle Menard Address: 12338 Emerson Drive Brighton MI 48116 Vice President: Address: \_\_\_\_\_ Secretary: Address: \_\_ Address: 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) 14. Thomas Bloom, Chairman / CEO

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



Lansing, Michigan

This is to Certify That

## BLOOM ROOFING SYSTEMS, INC.

was validly incorporated on May 15, 1981, as a Michigan profit corporation, and said corporation is validly in existence under the laws of this state.

This certificate is issued pursuant to the provisions of 1972 PA 284, as amended, to attest to the fact that the corporation is in good standing in Michigan as of this date and is duly authorized to transact business and for no other purpose.

This certificate is in due form, made by me as the proper officer, and is entitled to have full faith and credit given it in every court and office within the United States.

2009 FEB 23 P 1: 35
SECRETARY OF STATE

In testimony whereof, I have hereunto set my hand, in the City of Lansing, this 27th day of January, 2009.

, Director

Bureau of Commercial Services