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Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023

Phone : (850)222-1092

Fax Number

: (850)878-5368

Enter the email address for this business entity to be used for future7 annual report mailings. Enter only one email address please .

| Email | Address: |
|-------|----------|
|-------|----------|

FOREIGN PROFIT/NONPROFIT CORPORATION

Ludowici Roof Tile, Inc.

| Certificate of Status | 0 |
|-----------------------|---------|
| Certified Copy | 0 |
| Page Count | 05 |
| Estimated Charge | \$70.00 |

1. Stilvers MAR 1 7 2010

COVER LETTER

| TO: New Filing Section Division of Corporations | | | | | |
|--|--|--|--|--|--|
| SUBJECT: LUDOWICI ROOF TILE, INC. | | | | | |
| SUBJECT: Ludowici Roof Tile, 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: | | | | | |
| Jeremy Hayden (Name of Person) | | | | | |
| (Name of Person) | | | | | |
| Frost Brown Todd LLC | | | | | |
| (Firm/Company) 2200 PNC Control 201 F 5th Street | | | | | |
| (Name of Person) Frost Brown Todd LLC (Firm/Company) 2200 PNC Center, 201 E. 5th STREET (Address) Cincinnati OH 45202-4182 | | | | | |
| 2200 PNC CENTER, 201 E, 5 STREET (Address) (Address) (Cincinnati OH 45202-4182 (City/State and Zip code) | | | | | |
| Cincinnati OH 45202-4182 \$\frac{1}{2}\$ \$\frac{1}{2}\$ \$\frac{1}{2}\$\$ \$\frac{1}{2}\$ | | | | | |
| (City/State and Zip code) | | | | | |
| For further information concerning this matter, please call: | | | | | |
| Teremy Hayden at (513) 651-6912 (Name of Person) (Area Code & Daytime Telephone Number) | | | | | |
| (1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1. | | | | | |
| STREET/COURTER 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: | | | | | |
| \$78.75 Filing Fee & \$78.75 Filing Fee & \$78.75 Filing Fee & Certificate of Status Certified Copy Certificate of Status & Certified Copy | | | | | |

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

| REGISTER A FOREIG | FN CORPORATION TO TRANSACT | STATUTES, THE FULLOWING IS SUBMITTED TO BUSINESS IN THE STATE OF FLORIDA. | |
|--|---|---|--------------------|
| (Enter name of corpor | ration; must include "INCORPORATE! "Inc," "Co," or "Corp.") | D," "COMPANY," "CORPORATION," | |
| (If name unqualishin | n Florida rapper alterrate comporate nam | e adopted for the purpose of transacting business in Plo | rida) |
| · . | | | |
| 2. Delawa (State or country unde | r the law of which it is incorporated) | (FEI number, if applicable) | · |
| 4. 6/19/1 | 989 | (Duration: Year corp. will cease to exist or "perpetu | |
| (Date of in | corporation) | (Duration: Year corp. will cease to exist or "perpetu | ıal") |
| 6. 1/1/20 | 10 | in Florida, if prior to registration) | |
| | (SEE SECTIONS 607.1501 & 607. | in Florida, it prior to registration) 1502, F.S., to determine penalty liability) | |
| 1. 4757 Tu | leplant Rd New L | exington, OH 43764 | |
| | | | |
| 4757 Tile | eplantRd, New Lex (Current mailing ac | ington, OH 43764 | |
| | (Current mailing ac | Idress) | Z ₄ 201 |
| 8. Se// | Clay Roof tile | country to be carried out in state of Florida) | |
| (Purpose(s) of a | corporation authorized in home state or | country to be carried out in state of Florida) | R I 6 |
| 9. Name and street add | Iress of Florida registered agent: (P. | O. Box NOT acceptable) | |
| Name: | C T Corporation System | and the | |
| Office Address: | 1200 South Pine Island Road | | 8: 5 E |
| Office Address | Plantation | | Č. |
| | (City) | , Florida, (Zip code) | |
| 10 70 - Francis de Compa | • • • | • • | |
| Registered agent' Having been named as | | vice of process for the above stated corporation at | the place |
| designated in this appl | ication, I hereby accept the appoint | tment as registered agent and agree to act in this | capacity. I |
| | y with the provisions of all statutes and accept the obligations of my p | relative to the proper and complete performance osition as registered agent. | oj my uunes, |
| | C T Corporation System | Chric Makie wie | |
| b | | Chris McNectr Assistant Secretaria | |
| By: | | Accietant Carried | |

- 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 | i | | | |
|---|---|--|----------------|---------------------|
| Chairman: | Herve Gastine/ | | | |
| Address: | 15 rue Page's | | | |
| • | 92158 Suresnes Codex France | | | |
| Vice Chairman; | Guillaume Latil | | | 4 |
| Address: | 15 rue Pages | <u> </u> | | |
| | 92158 Suresnes Cedex France | | | _ |
| Director: | Rhonda VICKroy | | | 100.00 a.s. |
| Address: | 4757 Tileplant Rd | | | _ |
| | New Lexington, OH 43764 | | | |
| | Antonin de Margeric | <u>. </u> | | |
| Address: | 4757 Tile plant Rd | | | _ |
| | New Lexington, OH 43764 | 100 mg | 201 | |
| B. OFFICERS | , | 至 | 2010 HAR | •3€4.03 36 36 |
| President: | Guillaume Latel | 85年 | 9 | - Contraction |
| Address: | 15 rue Page's | The state of the s | 2 | 17 |
| | 92158 Suresnes Codex France | 95 | <u>හ</u> | |
| Vice President: | A. Tab Colbert | Entai | <u> </u> | |
| Address: | 4757 TILEPLANT Rd | | ····· | |
| <i>-</i> | New Lexington, OH 43764 | | | _ |
| Secretary: | Rhonda Vickroy | | _ _ | |
| Address: | 4757 Tileplant Rd New Lexington, | OH 437 | 164 | |
| Treasurer: | Rhonda Vickroy | | | |
| Address: | | DH 437 | 64 | _ |
| 1 A 1 A 1 A 1 A 1 A 1 A 1 A 1 A 1 A 1 A | | | | |
| 0 | ry, you may attach an addendum to the application listing additional officers and | Nor directors. | | |
| 13. | (Signature of Director or Officer listed in number 12 of the application) | | | _ |
| 100 | | | | |
| 14;KM | (Typed or printed name and capacity of person signing application) | | | |
| | | | | |

Addendum

A. Directors continued:

Director: A. Tab Colbert

4757 Tileplant Rd

New Lexington, OH 43764

B. Officers continued:

CEO: Antonin de Margeric 4757 Tileplant Rd New Lexington, OH 43764

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Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "LUDOWICI ROOF TILE, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE SIXTEENTH DAY OF MARCH, A.D. 2010.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

2010 HAR 16 AM 8: 58

2198604 8300

100285395

AUTHENTY CATION: 7872979

DATE: 03-16-10

verify this certificate coling