

F13000003230

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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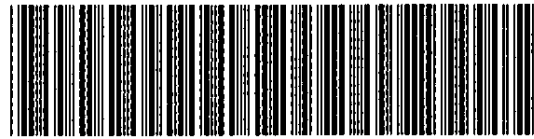
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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MRD
7/30/13



CORPORATION SERVICE COMPANY

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13 JUL 29 AM 8:15

ACCOUNT NO. : I20000000195

REFERENCE : 742040 7598947

AUTHORIZATION :

COST LIMIT : \$ 70.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ORDER DATE : July 29, 2013

ORDER TIME : 11:02 AM

ORDER NO. : 742040-005

CUSTOMER NO: 7598947

FOREIGN FILINGS

NAME: INDUSTRIAL COMMERCIAL
INSULATION, INC.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Susie Knight -- EXT# 52956

EXAMINER: _____

**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.*

1. Industrial Commercial Insulation, Inc.

(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 in Florida)

2. Kansas

3. 48-0882971

(State or country under the law of which it is incorporated)

(FEI number, if applicable)

4. 02/06/1979

5. Perpetual

(Date of incorporation)

(Duration: Year corp. will cease to exist or "perpetual")

6. 10/01/2013

(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 650 S. Exeter Street, Suite 1000, Baltimore, Maryland 21202

(Principal office address)

650 S. Exeter Street, Suite 1000, Baltimore, Maryland 21202

(Current mailing address)

8. Provide insulation, scaffolding, piping, siding, roofing and repair services.

(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Corporation Service Company

Office Address: 1201 Hays Street

Tallahassee

(City)

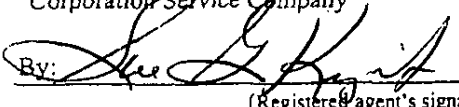
, Florida 32301

(Zip code)

10. Registered agent's acceptance:

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.

Corporation Service Company

By: 

(Registered agent's signature)

Sue G. Knight
Assistant Vice President

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.

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TALLAHASSEE, FLORIDA

12. Names and business addresses of officers and/or directors:

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A. DIRECTORS

Chairman: No chairman currently appointed.

Address: _____

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Vice Chairman: No vice chairman currently appointed.

Address: _____

Director: R. Alan Macksey, Jr.

Address: 650 S. Exeter Street, Suite 1000, Baltimore, Maryland 21202

Director: Michael Draï

Address: 650 S. Exeter Street, Suite 1000, Baltimore, Maryland 21202

B. OFFICERS

President: Craig Kaple

Address: 650 S. Exeter Street, Suite 1000, Baltimore, Maryland 21202

Vice President: No vice president currently appointed.

Address: _____

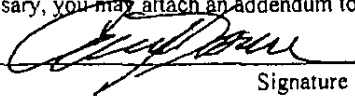
Secretary: Michael Draï

Address: 650 S. Exeter Street, Suite 1000, Baltimore, Maryland 21202

Treasurer: Hans Petter Hansen

Address: 650 S. Exeter Street, Suite 1000, Baltimore, Maryland 21202

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. 
Signature of Director or Officer

The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

14. Craig Kaple, President

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

**ADDENDUM TO THE APPLICATION BY FOREIGN CORPORATION FOR
AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA**

Additional Directors:

Sam Morasca, 650 S. Exeter Street, Suite 1000, Baltimore, Maryland 21202

Peter P. Vrettakos, 650 S. Exeter Street, Suite 1000, Baltimore, Maryland 21202

Hans Petter Hansen, 650 S. Exeter Street, Suite 1000, Baltimore, Maryland 21202

Victor Barnhart, 650 S. Exeter Street, Suite 1000, Baltimore, Maryland 21202

Todd Matherne, 650 S. Exeter Street, Suite 1000, Baltimore, Maryland 21202

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TALLAHASSEE, FLORIDA

STATE OF KANSAS
OFFICE OF
SECRETARY OF STATE
KRIS W. KOBACH

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13 JUL 29 AM 8:15

I, KRIS W. KOBACH, Secretary of State of the state of Kansas, do hereby certify, that according to the records of this office.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Business Entity ID Number: 0569871

Entity Name: INDUSTRIAL COMMERCIAL INSULATION, INC.

Entity Type: KANSAS FOR PROFIT CORPORATION

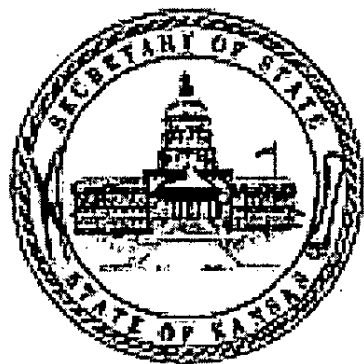
State of Organization: KS

Resident Agent: CORPORATION SERVICE COMPANY

Registered Office: 2900 SW Wanamaker Drive Suite 204, TOPEKA, KS 66614

was filed in this office on February 06, 1979, and is in good standing, having fully complied with all requirements of this office.

No information is available from this office regarding the financial condition, business activity or practices of this entity.



In testimony whereof I execute this certificate and affix the seal of the Secretary of State of the state of Kansas on this day of July 29, 2013

KRIS W. KOBACH
SECRETARY OF STATE

Certificate ID: 582412 - To verify the validity of this certificate please visit <https://www.kansas.gov/bess/flow/validate> and enter the certificate ID number.