F14000001772

(Requestor's Name)
(Address)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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DIVISION CO BOARD CO ALIGNE THE STATE OF STATE O

#03/1920r

COVER LETTER

TO:	New Filing Secti Division of Corp			
SUBJI	ECT: B	W Fiber Glas	es Inc	
		Name of corporat	tion - must include suffix	
Dear Si	r or Madam:			
"Certifi	icate of Existence		for Authorization to Transa Standing" and check are sub siness in Florida.	
Please :	return all correspo	ondence concerning this ma	atter to the following:	
Ti	m Leonard			
		Name	of Person	
Be	W fiber	alacs		
		- 11111/	Company	
422	2 Wost	Dixon Blud		•
	<u> </u>	Ac	Idress	
She	Mby NC	28152 City/Stat		
	1 × 1 × 1	City/Stat	e and Zip code	
Jin	LeBWFib	eralass. COM	ed for future annual report r	
		Email address: (to be use	ed for future annual report r	notification)
For fur	ther information c	oncerning this matter, plea	se call:	
	,			
Jim	Leonard	at (7cA	<u> </u>	15×116
	Name of Person	Ar	ea Code & Daytime Telepho	one Number
	STREET/COUF New Filing Secti Division of Corp Clifton Building 2661 Executive O	orations	MAILING A New Filing Se Division of Co P.O. Box 6327 Tallahassee, F	ction prporations
	Tallahassee, FL	32301		
Enclose	ed is a check for the	ne 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

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.

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting	business in Florida)
. North Carolina (State or country under the law of which it is incorporated) (FEI number, if applic	
(State or country under the law of which it is incorporated) (FEI number, if applications)	able)
December 15 1998 5. Per Pet Un 1 (Date of incorporation) 5. Duration: Year corp. will cease to e	
(Date of incorporation) (Duration: Year corp. will cease to e	xist or "perpetual")
(Date first transacted business in Florida, if prior to registration)	
(3LL 3LC 1101/3 007.1301 & 007.1302, 1.3., to determine penalty habitity	
4222 West Dixon Blud Shelby, NC 28152	20 S2
(Principal office address)	
cme	
(Current mailing address)	ÇP Z
<u> </u>	# 65°
Distribution of Fiber glass products	
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florid	da)
Name and <u>street address</u> of Florida registered agent: (P.O. Box <u>NOT</u> acceptable)	
Name: Marion Bill Beason	
ffice Address: 161 12th Street East	
Tierra Verde , Florida 33715	
(City) (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.

x Marin Beil Be ase.

(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: Marion Bill Beason
Address: 101 12th Street EAST
Tierra Verde, FL 33715
Vice Chairman:
Address:
Director
Director:
Address:
Director:
Address:
B. OFFICERS
President: Marion Brent Beason
Address: 9521 Hayden Hall Cir
Charlotte NC 28210
Vice President:
Address:
Secretary:
Address:
Treasurer:
Address:
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.
Signature of Director or Officer The officer or director signing this document (and who is listed in number 12 shows) affirms that the facts stated herein
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
(Typed or printed name and capacity of person signing application)



NORTH CAROLINA Department of the Secretary of State

CERTIFICATE OF EXISTENCE

I, Elaine F. Marshall, Secretary of State of the State of North Carolina, do hereby certify that

B & W FIBER GLASS, INC.

is a corporation duly incorporated under the laws of the State of North Carolina, having been incorporated on the 15th day of December, 1998, with its period of duration being Perpetual.

I FURTHER certify that, as of the date set forth hereunder, the said corporation's articles of incorporation are not suspended for failure to comply with the Revenue Act of the State of North Carolina; that the said corporation is not administratively dissolved for failure to comply with the provisions of the North Carolina Business Corporation Act; that its most recent annual report required by N.C.G.S. 55-16-22 has been delivered to the Secretary of State; and that the said corporation has not filed articles of dissolution as of the date of this certificate.





Scan to verify online.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 14th day of April, 2014.

Elaine J. Marshall

Secretary of State