

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:		1
	Division of Corporations	
	Fax Number : (850)617-6383	
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Prom:	•	·
	Account Name : API PROCESSING - LICENSING (TAMP	September 4
	Account Number : I20150000120	$\dot{\psi}_{2}$ $ au_{2}$
	Phone : (954)233-0222	2
	Fax Number : (954)206-0422	

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

Email Address: angelo@apiprocessing.com

SEGNETAR OF STATE

FOREIGN PROFIT/NONPROFIT CORPORATION HOFFMAN BUILDING TECHNOLOGIES, INC.

Certificate of Status	1
Certified Copy	0
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Help

## **COVER LETTER**

TO: Registration Section Division of Corporations						
SUBJECT: HOFFMAN BUILDING TECHNOLOGIES, 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," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.						
Please return all correspondence concerning this matter to	he following:					
ANGELA D. BR.	AGG					
Name of Pers	on					
API PROCESSIN	IG					
Firm/Compan						
29157 CHAPEL PARK	DRIVE, STE A					
Address						
WESLEY CHAPE	I FI 33543					
City/State and 2						
angela@apiprocess	ing.com					
E-mail address: (to be used for fi	uture annual report notification)					
For further information concerning this matter, please call:						
ANGELA BRAGG at (_954)	233-0222					
Name of Person Area Code	Daytime Telephone Number					
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314					
Enclosed is a check for the following amount:						
S70.00 Filing Fee S78.75 Filing Fee & S7 Certificate of Status Ce	8.75 Filing Fee & S87.50 Filing Fee, rtifled Copy 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 PLORIDA.

1 <del></del> <del>}</del>	HOFFMAN BUILD	<u>ING TECHI</u>	VOLOGIES, INC.				
(Enter name of corporation "Inc.," "Co.," "Corp," "In	(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp,")						
(If name unavailable in FI	orida, enter alternate con	rporate name ac	dopted for the purpose of transacting business in	Florida)			
2. NORTH C	CAROLINA	3	81-2589144				
(State or country under t	he law of which it is inco	orporated)	81-2589144 (FEI number, if applicable)				
1 05/08/20	146	5					
(Date of incorp	poration)		(Date of duration, if other than perpetus	ıl)			
6.			•				
u			Florida, if prior to registration)  22, F.S., to determine penalty liability)	<del></del>			
7 38	16 PATTERSON	STREET	GREENSBORO, NC 27407				
/·	·	(Principa	office address)				
		-					
	{	Current mailing	address, if different)				
				<u></u>			
8. Name and street address	ss of Florida registered	d agent; (P.O.	. Box NOT acceptable)	F	٠		
M		=1101110		$\langle - \rangle$	•33		
Name: API PROCESSING-LICENSING, INC.		-1	(5.2) 20)				
Office Address: 341	9 GALT OCEAN I	DRIVE, STE	<u> </u>	>			
	CT   AUDEDE	DA L C	121a-14a <b>9220</b>	AH 10:	7,114		
<u></u>	City)		, Florida <u>33308</u> (Zip code)	<u> </u>			
	. • • •		(21) 4444)	32			
9. Registered agent's ac			ce of process for the above stated corporation				
			æ oj process for the above stateu corporation vent as registered agent and agree to act in				
further agree to comply v	vith the provisions of	all statutes ro	lative to the proper and complete perform	ince of my	'		
duties, and I am familiar	with and accept the a	bligations of	my posttlon as registered agent.				
	( hun )	< 1	+				
•••	\NJ(W)	Registered at	gent's signature)				

10. 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.

11. Names and business addresses of officers and/or directors:		
A. DIRECTORS		
Chairman: LOUIS B. HOFFMAN		<del>_</del>
Address: 3816 PATTERSON STREET		<del></del>
GREENSBORO, NC 27407		
Vice Chairman: JAMES H. BINGHAM, JR.		
Address: 3816 PATTERSON STREET		
GREENSBORO, NC 27407		
Director: WILLIAM M. EASTERDAY		
Address: 3816 PATTERSON STREET		
GREENSBORO, NC 27407		
Director: ADAM L. HOFFMAN		<del></del>
Address: _3816 PATTERSON STREET		
GREENSBORO, NC 27407		
B. OFFICERS		
President: WILLIAM M. EASTERDAY		<del></del>
Address: 3816 PATTERSON STREET	—	
GREENSBORO, NC 27407		
Vice President: AUSTIN S. CARTER		
Address: 3816 PATTERSON STREET	( <del>6</del> )	
GREENSBORO, NC 27407	翠	<del></del> ;
Secretary: CHRISTOPHER A. STEGALL	,	
Address: 3816 PATTERSON STREET GREENSBORO, NC 27407	274	ا ). ا ا
Treasurer:	<u>5</u>	1.6
Address:	<u>ෆ</u> ෆ	<u> </u>
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directo	rs.	
The officer or director signing this document (and who is listed in number 11 above) affirms that the facts state are true and that he or she is aware that false information submitted in a document to the Department of State a third degree felony as provided for in s.817.155, F.S.	ed here constit	ein utes
13. WILLIAM M. EASTERDAY-PRESIDENT (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

### HOFFMAN BUILDING TECHNOLOGIES, INC.

is a corporation duly incorporated under the laws of the State of North Carolina, having been incorporated on the 6th day of May, 2016, 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.

Certification# 99453437-1 Reference# 13429328- Page: 1 of 1 Verify this certificate online at http://www.sosnc.gov/verification

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 1st day of December, 2016.

Elaine & Marshall

Secretary of State