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.

(((H17000039364 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CAPITOL SERVICES, INC.

Account Number : 120160000017 : (800)345-4647

Fax Number

: (800)432-3622

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

T-m o	4.1	Address
LINA	11	ACCICESS

## FOREIGN PROFIT/NONPROFIT CORPORATION ONE ROOF SYSTEMS INC.

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$78.75

Electronic Filing Menu

Corporate Filing Menu

Help

D. SCOTT FEB 1 0 2017

### COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: One Roof Systems Inc.	corporation - mus	t include suffix	
Dear Sir or Madam;			
The enclosed "Application by Foreign Corp "Certificate of Existence," or "Certificate of above referenced foreign corporation to tran	Good Standing	and check are subm	Business in Florida," itted to register the
Please return all correspondence concerning	this matter to the	following:	
Capitol Services - Corporate Filing	s Team		
	Name of Person		-,, - <del>,</del>
Capitol Services, Inc.			<u> </u>
	Firm/Company		
206 E. 9th St., Ste. 1300			ion l
	Address		
Austin TX 78701			
	City/State and Zip	code	100 <b>90 03</b>
E-mail address: (i	to be used for futu	re annual report not	ification)
For further information concerning this matt	er, please call:		
Teresa Sharpley			
Name of Person	Area Code	Daytime Telepho	ne Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		MAILING ADI Registration Sec Division of Corp P.O. Box 6327 Tallahassee, FL	ion orations
Enclosed is a check for the following amoun  \$70.00 Filing Fee S78.75 Filing Fee Certificate of S	ee & 🕱 \$78.7	'5 Filing Fee & [ fied 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.

		adopted for the purpose of transacting business in Florid	
Delaware 3. (State or country under the law of which it is incorporated)		32-0515537 (FRI number, if applicable)	
-	,	•	
12/22/2016 (Dat	5. of insorporation)	(Date of duration, if other than perpetual)	
•	• •	,	
I43 Katy I	Hockley Cutoff Rd Katy, TX 77493 (Current mailing at address of Florida registered agent: (P.C.) Capitol Corporate Services, Inc.	pai office address)  3 ng address, if different)  O. Box NOT acceptable)	
	155 Office Plaza Dr Ste A	<del></del>	
ce Address:	Tallahassee	, Florida 32301	

Teresa Sharpley, Asst. Sec. on behalf of Capitol Corporate Services, Inc.

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.

13

11. Names and business addresses of officers and/or directors:	
A. DIRECTORS	
Chairman:	
Address:	
Vice Chairman:	
Address:	
Director:	
Address:	
Director:	
Address:	
B. OFFICERS	
President: Pete Bell CEO	
Address: 5443 Katy Hockley Cutoff Rd	
Katy,TX 77493	
Vice President: Randali Thompson COO	<u> </u>
Address: 5443 Katy Hockley Cutoff Rd	三 至 五 五
Katy, TX 77493	
Secretary: Assistant Secretary Marsha Campbell	
Address: 5443 Katy Hockley Cutoff Rd Katy, TX 77493	70
Treasurer: and Secretary Bryan Michalsky CFO	<u> </u>
Address: 5443 Katy Hockley Cutoff Rd Katy, TX 77493	·
NOTE: If necessary, you may such an addendum to the application listing additional of	fficors and/or directors.
12.	
Signature of Director or Officer The officer or director signing this document (and who is listed in number 11 above) affir are true and that he or she is aware that false information submitted in a document to the I a third degree follows as provided for in s.817.155, F.S.	
3 Randall Thompson Vice President COO	
(Typed or printed name and capacity of person signing applicatio	n)

# <u>Delaware</u>

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "ONE ROOF SYSTEMS, 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 NINTH DAY OF FEBRUARY, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ONE ROOF SYSTEMS, INC." WAS INCORPORATED ON THE TWENTY-SECOND DAY OF DECEMBER, A.D. 2016.

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

THE -9 THE 9 CO.

6259343 8300 SR# 20170785483

You may verify this certificate online at corp.delaware.gov/authver.shtml

MSR.

Authentication: 202013755

Date: 02-09-17