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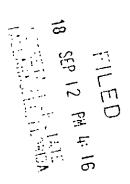
(Re	questor's Name)	
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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### **COVER LETTER**

TO:	Registration Se Division of Co					
		Flooring Products, In	ic.			
SUB.						
		Name c	of corporation	ı - must	include suffix	
Dear S	Sir or Madam:					
"Certi	ficate of Existence		of Good Sta	nding" a	nd check are sub	ct Business in Florida." omitted to register the
	e return all corresp d Warnock	pondence concerni	ng this matte	r to the i	following:	
			Name of	Person		
Beasle	ey Flooring Product	is, Inc.				
			Firm/Con	npany		
7702	Industrial Highway			•		
	···		Addr	ess		
Macoi	n, GA 31216			<b>~</b> 22		
			City/State a	and Zip o	rode	
rwarn	ock@beasleyfloorii	ngproducts.com				
		E-mail address	; (to be used	for futur	e annual report	notification)
For fu	irther information	concerning this m	atter, please	call:		
Ronal	onald Warnock 478 781-0155					
	Name of Perso		Area Coc	) le	Daytime Telep	hone Number
	Registration Se Division of Co Clifton Buildin 2661 Executive Tallahassee, Fl	rporations g : Center Circle . 32301			MAILING A Registration S Division of Co P.O. Box 632 Tallahassee, F	ection orporations 7
Enclo	sed is a check for	the following amo	ount:			
<b>S</b> \$7	0.00 Filing Fee	S78.75 Filing Certificate o			5 Filing Fee & ied Copy	☐ S87.50 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.

Beasley Floorin			
	orporation; must include "INCORPORATED," "orp." "Inc." "Co." or "Corp.")	COMPANY," "CORPORATION	
(If name unavaila	able in Florida, enter alternate corporate name add	opted for the purpose of transacting	g business in Florida)
Georgia			
(State or countr 04/22/2015	y under the law of which it is incorporated)		
	of incorporation) 5.	(IX - 61 - 2 - 16 A - 1	d
(Date 08/21/2018	of incorporation)	(Date of duration, if other)	than perpetual)
	(SEE SECTIONS 607.1501 & 607.1502 ighway, Mucon, GA 31216 (Principal	office address)	···
	(Current mailing :	address, if different)	7.50
. Name and stree	et address of Florida registered agent: (P.O. I Bobby Granatire	Box <u>NOT</u> acceptable)	EP 12
	3603 Maricpoa Court	<del>_</del>	
Office Address:	<del></del>	<del>_</del>	
	Ruskin	33573 , Florida	
	(City)	(Zip code)	

#### 9. 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.

(Registered agent'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. DIRI	ECTORS	
Chairman	: _ <del></del>	
Address:		
Vice Chai	irman:	
Address:		
_		
Director:	R. Darrell Beasley	
Address:	7702 Industrial Highway	
	Macon, GA 31216	
Director:	Deborah B. Johnson	fo
Address:	7702 Industrial Highway	E & 1
Address.	Macon, GA 31216	199 6 Mg
B. OFF	ICERS	2, 2,
President:	R. Darrell Beasley	
Address:	7702 Industrial Highway	
, rudi esa.	Macon, GA 31216	
Vice Pres	ident:	
Secretary:	Zachary T. Johnson	
Address:	7702 Industrial Highway, Macon, GA 31216	
Treasurer	Zachary T. Johnson	· · · · · ·
Address:	7702 Industrial Highway, Macon. GA 31216	
NOTE:	If necessary, you may attach an addendum to the application listing additional officers a	nd/or directors.
12. <b>_p</b>	h. Do Box	
The offic are true a a third do	Signature of Director or Officer cer or director signing this document (and who is listed in number 11 above) affirms that and that he or she is aware that false information submitted in a document to the Departnegree felony as provided for in s.817.155, F.S.	
	(Typed or printed name and capacity of person signing application)	· · ·

Control Number: 15041052

# STATE OF GEORGIA

## **Secretary of State**

Corporations Division 313 West Tower 2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530

#### CERTIFICATE OF EXISTENCE

I, Brian P, Kemp, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

#### Beasley Flooring Products, Inc. a Domestic Profit Corporation

was formed in the jurisdiction stated below or was authorized to transact business in Georgia on the below date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

 Docket Number
 : 16218497

 Date Inc/Auth/Filed
 04/22/2015

 Jurisdiction
 : Georgia

 Print Date
 : 09/07/2018

Form Number : 211



Brian P. Kemp Secretary of State