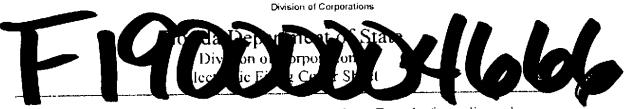
10/15/2019



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 : (614)280-3338 Phone

: (954)208-0845 Fax Number

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

Email Address:__

FOREIGN PROFIT/NONPROFIT CORPORATION

Howden USA Company

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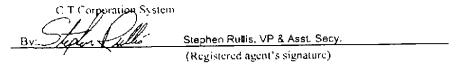
APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

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,	"Inc.," "Co.," "Co	orporation; must include "INCORPORATE orp," "Inc," "Co," or "Corp.")		adopted for the purpose of transacting business in Flo	orida)	-	
2	Delaware	ove in Froncia, ciner anermate est por are that		31-0730524			
۷.		y under the law of which it is incorporated)	٠.	(FEI number, if applicable)	-	_	
.1	12/20/2013		5.	Perpetual		_	
			(Date of duration, if other than perpetual)				
б.	Upon Qualificati	ion				_	
	<u> </u>	(Date first transacted busines		n Florida, il prior to registration) 502, F.S., to determine penalty liability)			
_	2022 5 9			, , , , , , , , , , , , , , , , , , , ,	20		
7.	7422 Shumes Ro	ad, Fuirfiled, OH 45014 (Pru	101	pal office address)	<u> </u>		
	Englo			•	5		
	same	(Current m	aili	ng address, if different)	5		
8.	Name and <u>stree</u>	et address of Florida registered agent: (Ρ.	O. Box NOT acceptable)	P# 2:	• :	
	Name:	C T Corporation System			: 22		
O	ffice Address:	1200 South Pine Island Road			10		
		Plantation		, Florida <u>33324</u>			
		(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.



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.

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11. Names and business addresses of officers and/or directors:	
A. DIRECTORS	
Chairman	
Address:	
Vice Chairman:	
Address.	
Director: Mark Paul Lehman	
Address: 6103 Ivydene Terrace, Baltimore, MD 21209	
Director:	
Address	
B. OFFICERS	
President: Peter Mark Sanders	2019
Address: 260 Springside Drive	
Akren, OH 44333	
Vice President: Mark Paul Lehman	
Address: 6103 Ivydene Terrace, Baltimore, MD 21209	
Secretary Mark Paul Lohman	N. C.
Address: 6103 Ivydene Terrace, Baltimore, MD 21209	
Treasurer. Scott Eyans	
Address: 7909 Parklane Road Suite 300, Columbia, SC 29223	
NOTE: Timecessary you may attach an addendum to the application listing addition	nal officers and/or directors.
Signature of Director or Officer The officer or director signing this document (and who is listed in number 11 above)) affirms that the facts stated herein

The officer or director signing this document (and who is listed in number 11 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.

13. Mark Paul Lehman, Vice President

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



Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "HOWDEN USA COMPANY" 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 FIFTEENTH DAY OF OCTOBER, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE REEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE REEN PAID TO DATE.

5453565 8300 SR# 20197551140

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

Authentication: 203795057

Date: 10-15-19