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PICK-UP WAIT MAIL
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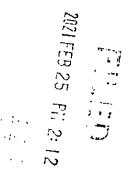
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COVER LETTER

TO: Registration Section Division of Corporations	3			
SUBJECT: FLOOR CARE SPE	ECIALISTS, INC.			
Sobabet.		on - must include suffix	-	
Dear Sir or Madam:				
The enclosed "Application by Fo "Certificate of Existence," or "Cabove referenced foreign corporations."	ertificate of Good Sta	anding" and check are sul	nct Business in Florida." comitted to register the	
Please return all correspondence	concerning this matt	er to the following:		
STUART SMITH				
· · · · · · · · · · · · · · · · · · ·	Name o	of Person	2721	
FLOOR CARE SPECIALISTS, INC			S T	
	Firm/Co	ompany	25	
525 WILSON STREET			70	
	Add	iress	N J	
DANVILLE, VA 24541				
	City/State	and Zip code		
STUART@FCSINDUSTRIALSOL				
E-mai	l address: (to be used	I for future annual report	notification)	
For further information concerning	ng this matter, please	call:		
STUART SMITH	434	429-3787		
Name of Person	at (⁴³⁴ Area Co	de Daytime Telep	hone Number	
STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		Registration S Division of C P.O. Box 632	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	
•	RIDA DEPARTMEN	T OF STATE □ \$78.75 Filing Fee & Certified 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.

FLOOR CARE	SPECIALISTS, INC.				
(Enter name of e "Inc" "Co.," "C	corporation: must include "INCORPORATED, Forp," "Inc," "Co," or "Corp,")	" "COMPANY," "CORPORATION,"			
(If name unavail	able in Florida, enter alternate corporate name	adopted for the purpose of transacting busin	ess in Fl	orida)	
VIRGINIA	3				
(State or countr	ry under the law of which it is incorporated)	(FEI number, if applicable)			
FEBRUARY 9.	1.700				
(Date of incorporation) (I		(Date of duration, if other than per	(Date of duration, if other than perpetual)		
			200		
325 WILSON ST	(SEE SECTIONS 607.1501 & 607.1: REET, DANVILLE, VA 24541	502, F.S., to determine penalty liability)	8 25 PK	1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	
•			2	مرسده	
Name and stree Name:	et address of Florida registered agent: (P.C. Registered Agents Inc.	D. Box NOT acceptable)			
fice Address:	7901 4th St N STE 300				
	St. Petersburg	. Florida 33702			
	(City)	(Zip code)			
	(Enter name of c "Inc" "Co.," "C (If name unavail VIRGINIA (State or counts FEBRUARY 9. (Date S25 WILSON ST	(Enter name of corporation: must include "INCORPORATED, "Inc" "Co" "Corp." "Inc" "Co" "Corp.") (If name unavailable in Florida, enter alternate corporate name VIRGINIA (State or country under the law of which it is incorporated) FEBRUARY 9, 1988 (Date of incorporation) (Date first transacted business in (SEE SECTIONS 607.1501 & 607.15025 WILSON STREET, DANVILLE, VA 24541 (Principal off (Current mailing) Name and street address of Florida registered agent: (P.C	(Enter name of corporation: must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.") (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting busin VIRGINIA (State or country under the law of which it is incorporated) (Date of incorporation) (Date of duration, if other than per (Date of incorporation) (Date of incorporation) (Date of duration, if other than per (Date Sections 607.1501 & 607.1502, F.S., to determine penalty liability) (Principal office street address) (Current mailing address, if different) Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Registered Agents Inc. 7901 4th St N STE 300 St. Petersburg Florida St. Petersburg Florida St. Poorida S	(Enter name of corporation: must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp." "Inc.," "Co.," or "Corp.") (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida (State or country under the law of which it is incorporated) (State or country under the law of which it is incorporated) (Date of incorporation) (Date of incorporation) (Date of incorporation) (Date of duration, if other than perpetual) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) (Principal office street address) (Current mailing address, if different) (Current mailing address, if different) Name: Registered Agents Inc. 7901 4th St N STE 300 St. Petersburg Florida 33702	

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 Agents Inc.
Bill Havre - Assistant Secretary

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.

A. DIRECTORS						
□Chairman	L. CONRAD SMITH, III Name:	□Chairman	Name: STUART SMITH			
□Vice Chairman	Address: 203 CORNWALLIS DR	□Vice Chairman	Address: 3385 GLADE CREEK BLVD N			
□Director	DANVILLE, VA 24540	□Director	APT 18			
■ President		□President	ROANOKE, VA 24012			
□Vice President		■ Vice President				
☐ Secretary	□Treasurer	■ Secretary	■ Treasurer			
□Other	Other	□Other	□Other			
□Chairman	Name: LEWIS C SMITH, JR	□ Chairman	Name:			
□Vice Chairman	Address: 218 LAUREL WOODS DR	□Vice Chairman	Address:			
□Director	DANVILLE, VA 24540	Director				
□President		□President	207			
□Vice President		□Vice President				
☐ Secretary	□Treasurer	Secretary	□ Freaksurer			
■Other	ER Other	□Other				
			2: 12			
□Chairman	Name:	□Chairman	Name:			
□Vice Chairman	Address:	□Vice Chairman	Address:			
□Director		□Director				
□President		□President				
□Vice President		□Vice President				
□Secretary	□Treasurer	□Secretary	□Treasurer			
□Other	□Other	□Other	Other			
Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form. 12. 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 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.

, STUART SMITH

Commontoealtho Hirginia



State Corporation Commission

CERTIFICATE OF GOOD STANDING

1 Certify the Following from the Records of the Commission:

That FLOOR CARE SPECIALISTS, INC. is duly incorporated under the lawsof the Commonwealth of Virginia;

That the corporation was incorporated on February 9, 1988;

That the corporation's period of duration is perpetual; and

That the corporation is in existence and in good standing in the Commonwealth of Virginia as of the date set forth below.

Nothing more is hereby certified.



Signed and Sealed at Richmond on this Date:

February 4, 2021

Bernard J. Logan, Clerk of the Commission

CERTIFICATE NUMBER: 2021020415456669