| 021 | Florida Department of State Division of Concentions Electronic riling Cover Sheet |
|--------------|---|
| + <u>-</u> - | 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. |
| | ((((H21000169504 3))) |
| | H210001695043ABC |
| | 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 : API PROCESSING Account Number : 120110000069 Phone : (954)567-0013 Fax Number : (954)567-3401 |
| 2 | |
| AH B: | |
| 2021 APR 28 | FOREIGN PROFIT/NONPROFIT CORPORATION River City Roofing Company, Inc. |
| 20 | Certified Copy 0 Page Count 04 Estimated Charge \$70.00 |

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NO.952 #802 17210001675243

APPLICATION BY FOREIGN CORFORATION 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.

River City Roofing Company, Inc. 1. (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Cu.," "Corp," "Inc," "Co," or "Corp.")

| | Illinois | 3 20-2506624 |
|-----------------|---|---|
| (State or count | ry under the law of which it is incorpora | (FEI number, if applicable) |
| | March 8, 2005 | 5. Perpetual |
| (Date | e of incorporation) | (Date of duration, if other than perpetual) |
| | (Den Carlos da Llar | iness in Florida, if prior to registration) |
| | | . 607.1502, F.S., to determine penalty liability) |
| | 6000 West Pl | lank Road, Peoria, TL 61604 |
| | (Princi | pal office <u>street</u> address) |
| | 6000 West P | lank Road, Peoria, H. 61604 |
| - | (Curren) | t mailing address, if different) |

Office Address: _____. Florida ________ (Zip code) Fort Lauderdale (City)

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. 1 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. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

I CALL A AT CHARLES

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HD.952 #003 H21000167564 3 Apr 30151

| A. DIRECTORS | | | |
|-----------------|---------------------------|-----------------|---------------------------------|
| 🗆 Chairman | Timothy Garrison Name: | 🗆 Chairman | Name: |
| UVice Chairman | Address: | 🗆 Vice Chairman | Address: |
| Director | Peoria, IL 61604 | Director | |
| President | | □President | |
| ∏Vice President | | □Vice President | |
| Secretary . | Treasurer | Scoretary | Treasurer |
| Other | Qther | Other | (1)Other |
| | | | |
| []Chaiman | Name: | Chainnan | Name: |
| ∐Vice Chairman | Address: | 🗆 Vice Chairman | Address: |
| Director | | Director | |
| President | | President | |
| □Vice President | · | □Vice President | |
| Secretary | Treasurer | Secretary | DTrezsurer |
| 00ther | | [] Other | □Other |
| | | | |
| Choirman | Name: | Chairman | Name: |
| DVice Chairman | Address: | □Vice Chairman | Address: |
| Director | | Director | · · · · · · · · · · · · · · · · |
| President | | ∐President | |
| □Vice President | | □Vice President | |
| Secretary | Treasurer | Secretary | Treasurer |
| COther | Other | 01her | [] Other |

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals muy be added to the index when filing your Florida Department of State Annual Report form.

12. ega 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.

| Timothy | Garrison, | Presiden |
|---------|-----------|----------|
| | | |

13. ___

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

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HO.952 #004 1421000165004 3 Refer 40124

File Number 6412-009-3

To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that I am the keeper of the records of the Department of

Business Services. I certify that

RIVER CITY ROOFING COMPANY, INC., A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON MARCH 08, 2005, APPEARS TO HAVE COMPLIED WITH ALL THE PROVISIONS OF THE BUSINESS CORPORATION ACT OF THIS STATE, AND AS OF THIS DATE, IS IN GOOD STANDING AS A DOMESTIC CORPORATION IN THE STATE OF ILLINOIS.



In Testimony Whereof, I hereto set

my hand and cause to be affixed the Great Seal of the State of Illinois, this 27TH day of APRIL A.D. 2021.

esse

SECRETARY OF STATE

Authentication #: 2111700640 verifiable until 04/27/2022 Authenticate at: http://www.cyberdriveillingis.com