

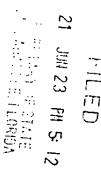
| (Requestor's Name) | | | | | | |
|---|--|--|--|--|--|--|
| (Address) | | | | | | |
| (Address) | | | | | | |
| (City/State/Zip/Phone #) | | | | | | |
| PICK-UP WAIT MAIL | | | | | | |
| (Business Entity Name) | | | | | | |
| (Document Number) | | | | | | |
| Certified Copies Certificates of Status | | | | | | |
| Special Instructions to Filing Officer: | | | | | | |
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Office Use Only



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COVER LETTER

| _ | tration Section ion of Corporations | | | | | |
|--|--|--------------------------|--|--|--|--|
| SUBJECT: | EASTERN LUMBER AND | BUILDING SUF | PPLY, INC. | | | |
| Name of corporation - must include suffix | | | | | | |
| Dear Sir or M | adam: | | | | | |
| "Certificate of | "Application by Foreign Co f Existence," or "Certificate ced foreign corporation to to | of Good Stand | ing" and check are subn | | | |
| Please return | all correspondence concerni | ng this matter t | o the following: | | | |
| RON CANTO | R | | | | | |
| | | Name of P | erson | | | |
| EASTERN LU | MBER AND BUILDING SU | PPLY, INC. | | | | |
| | | Firm/Comp | any | | | |
| 7803 SW ELL | IPSE WAY #B9 | | | | | |
| | | Addres | S | | | |
| STUART, FLO | ORIDA 34997 | | | | | |
| | | City/State and | d Zip code | | | |
| RONCANTOR | R@CANTORCOMPANIES.CO | | | | | |
| | E-mail address | : (to be used fo | r future annual report no | otification) | | |
| For further int | ormation concerning this m | atter, please ca | 11: | | | |
| RON CANTO | R | 908 | 925-6650 | | | |
| Name | e of Person | Area Code | Daytime Teleph | one Number | | |
| STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303 | | | Registration Se Division of Co P.O. Box 6327 | MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 | | |
| | check for the following amorek payable to: FLORIDA DI ng Fee \$78.75 Filin Certificate of | EPARTMENT (g Fee & □ | OF STATE \$78.75 Filing Fee & Certified 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.

| | MBER AND BUILDING SUPPLY, INC. | | |
|-------------------|---|--|--------------------------|
| (Enter name of co | orporation; must include "INCORPORATED orp," "Inc," "Co," or "Corp.") | D." "COMPANY," "CORPORATIO |),," |
| | | | |
| (If name unavail: | able in Florida, enter alternate corporate nam | ne adopted for the purpose of transacti | ing business in Florida) |
| NEW JERSEY | | 3. 22-1548970 (FEI number, if a | |
| (State or countr | y under the law of which it is incorporated) | (FEI number, if a | applicable) |
| DECEMBER 10 |), 1952 | 5 | |
| | of incorporation) | 5(Date of duration, if other than perpetual) | |
| NONE | | | |
| | (Date first transacted business (SEE SECTIONS 607.1501 & 607 | s in Florida, if prior to registration) .1502, F.S., to determine penalty liabi | ility) |
| 7803 SW ELLIPS | SE WAY #B9, STUART, FL 34997 | | |
| <u> </u> | | office street address) | |
| | | | |
| | (Current mai | ling address, if different) | |
| | | | <u> 2</u> |
| Name and street | et address of Florida registered agent: (F | P.O. Box NOT acceptable) | |
| Name: | MICHAEL CANTOR | | FILI JUN 23 |
| | 12411 HAUTREE CT | | 23 [|
| fice Address: | | | |
| fice Address: | | . Florida 33418 (Zip code) | |

under the law of which it is incorporated.

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

^{11.} For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

| A. DIRECTORS | | | | | | | |
|--|------------------------------|------------------|-------------------------|--|--|--|--|
| □Chairman | Name: MICHAEL CANTOR | ☐ Chairman | Name: RON CANTOR | | | | |
| □Vice Chairman | Address: | □Vice Chairman | 7803 SW ELLIPSE WAY #B9 | | | | |
| Director | PALM BEACH GARDENS, FL 33418 | □Director | STUART, FL 34997 | | | | |
| ■ President | | □President | | | | | |
| □Vice President | | ■ Vice President | | | | | |
| ☐ Secretary | ■ Treasurer | ■ Secretary | □Treasurer | | | | |
| □Other | □ Other | Other | Other | | | | |
| | | | | | | | |
| □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 | | | | |
| | | | | | | | |
| □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 filling your Elorida 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.

STATE OF NEW JERSEY DEPARTMENT OF THE TREASURY DIVISION OF REVENUE AND ENTERPRISE SERVICES SHORT FORM STANDING

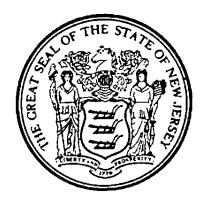
EASTERN LUMBER AND BUILDING SUPPLY, INC. 3583035000

I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic For-Profit Corporation was registered by this office on December 10, 1952.

As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.

I further certify that the registered agent and office are:

RON CANTOR 114 CHESTNUT HILL DRIVE NEW PROVIDENCE, NJ 07974



IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my Official Seal at Trenton, this 17th day of June, 2021

Elizabeth Maher Muoio State Treasurer

Certificate Number: 6120183382

Verify this certificate online at

https://www1.state.nj.us/TYTR_StandingCert/JSP/Verify_Cert.jsp