

F21000006564

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

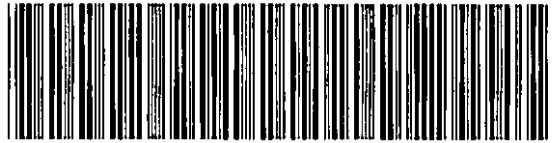
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TALLAHASSEE, FL



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 21, 2021

PAMELA ORKIS
601 TALLMADGE ROAD
KENT, OH 44240

SUBJECT: CARTER LUMBER, INC. (INDIANA CORP)
Ref. Number: W21000139576

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the **complete document**, including the electronic filing cover sheet.

The name cannot use two different suffix. we can use the alternative name but after (indiana) you have to use what matches the name INC.,

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Suzanne Hawkes
Regulatory II

Letter Number: 821A00025689

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CARTER LUMBER INC.

Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

PAMELA ORKIS

Name of Person

THE CARTER-JONES LUMBER COMPANY

Firm/Company

601 TALLMADGE ROAD

Address

KENT, OHIO 44240

City/State and Zip code

TAXESFAX@CARTERLUMBER.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

PAMELA ORKIS

at (330) 673-6100 EXT 257

Name of Person

Area Code

Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

\$70.00 Filing Fee

\$78.75 Filing Fee &
Certificate of Status

\$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.

1. CARTER LUMBER, INC.

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

CARTER LUMBER, INC. INDIANA

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. INDIANA 3. 35-1103214
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 07/02/1964 5.
(Date of incorporation) (Date of duration, if other than perpetual)

6.
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 601 TALLMADGE ROAD, KENT, OH 44240
(Principal office street address)

(Current mailing address, if different)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: CORPORATION SERVICE COMPANY

Office Address: 1201 HAYS STREET

TALLAHASSEE, Florida 32301
(City) (Zip code)

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DEPARTMENT OF STATE
TALLAHASSEE, FL

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.

Amanda E. Robinson, Assistant Vice President

(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]:

A. DIRECTORS

Chairman Name: NEIL C. SACKETT
 Vice Chairman Address: 601 TALLMADGE ROAD
 Director Kent, OH 44240
 President _____
 Vice President _____
 Secretary Treasurer
 Other _____ Other _____

Chairman Name: JEFFREY S. DONLEY
 Vice Chairman Address: 601 TALLMADGE ROAD
 Director KENT, OH 44240
 President _____
 Vice President _____
 Secretary Treasurer
 Other _____ Other _____

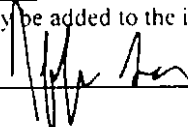
Chairman Name: JEFFREY L. SEDER
 Vice Chairman Address: 601 TALLMADGE ROAD
 Director KENT, OH 44240
 President _____
 Vice President _____
 Secretary Treasurer
 Other _____ Other _____

Chairman Name: THOMAS L McCLARY
 Vice Chairman Address: 601 TALLMADGE ROAD
 Director KENT, OH 44240
 President _____
 Vice President _____
 Secretary Treasurer
 Other _____ Other _____

Chairman Name: _____
 Vice Chairman Address: _____
 Director _____
 President _____
 Vice President _____
 Secretary Treasurer
 Other _____ Other _____

Chairman Name: _____
 Vice Chairman Address: _____
 Director _____
 President _____
 Vice President _____
 Secretary Treasurer
 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.

13. JEFFREY L. SEDER, VICE PRESIDENT
 (Typed or printed name and capacity of person signing application)

State of Indiana
Office of the Secretary of State

CERTIFICATE OF EXISTENCE

To Whom These Presents Come, Greeting:

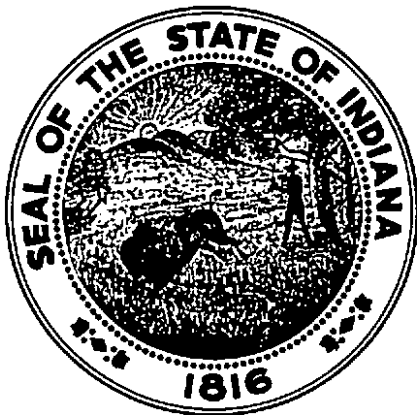
I, HOLLI SULLIVAN, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana, the custodian of the corporate records and the proper official to execute this certificate.

I further certify that records of this office disclose that

CARTER LUMBER INC

duly filed the requisite documents to commence business activities under the laws of the State of Indiana on July 01, 1964, and was in existence or authorized to transact business in the State of Indiana on October 05, 2021.

I further certify this Domestic For-Profit Corporation has filed its most recent report required by Indiana law with the Secretary of State, or is not yet required to file such report, and that no notice of withdrawal, dissolution, or expiration has been filed or taken place. All fees, taxes, interest, and penalties owed to Indiana by the domestic or foreign entity and collected by the Secretary of State have been paid.



In Witness Whereof, I have caused to be affixed my signature and the seal of the State of Indiana, at the City of Indianapolis, October 05, 2021

HOLLI SULLIVAN
SECRETARY OF STATE

194420-028 / 20212236022

All certificates should be validated here: <https://bsd.sos.in.gov/ValidateCertificate>

Expires on November 04, 2021.