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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Ascount Name : INCORP SERVICES INC

Account Number : 120120000007 Phone

Fax Number

: (702)866-2500 ; (702)986-2298

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

Email Address: documents@incorp.com

FOREIGN PROFIT/NONPROFIT CORPORATION MORGAN WINDOW & GLASS, INC.

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9: 08 2022 HAY -- 4 KM

COVER LETTER

χO:	Division of Corporations				
STUBI	_	MORGAN WINDO	W & GLASS, INC.		
SUBJECT: Name of corporation - must include suffix					
Dear S	Sir or Madam:				
"Certi	nclosed "Application by Fore ficate of Existence," or "Cer referenced foreign corporati	tificate of Good Stand	ing" and check are submi		
Please	return all correspondence co	oncerning this matter	to the following:		
		Jaycie Ho	ward		
		Name of I	Person		
		InCorp Servi	ces, Inc.		
		Firm/Com	· ·		
	3773	Howard Hughes Pa	arkway, Suite 500S		
		Addre			
		Las Vegas, Nevad	a 89169-6014 		
		City/State ar documents@in	•		
	E-mail	address: (to be used fo	or future annual report not	tification)	
For fu	rther information concerning	this matter, please ca	aU;		
Jaycie	Howard for InCorp Services	, Inc. at (702)	866 - 2500		
	Name of Person	Area Code	Daytime Telepho	ne Number	
	STREET/COURIER AD Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Su Tallahassee, FL 32303		MAILING AD Registration Sec Division of Con P.O. Box 6327 Tallahassee, FL	ction porations	
Please	-	IDA DEPARTMENT	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.

"Inc.," "Co.," "C	orporation; must include "INCORPORATEI orp," "Inc," "Co," or "Corp."))," "COMPANY," "CORPORATION,"	
		.:	
(If name unavail	able in Florida, enter alternate corporate nam	e adopted for the purpose of transacting bu	isin e ss in Florida)
Georgia	3	J	
(State or countr	y under the law of which it is incorporated)	(FEI number, if applic	able)
10/14/2003	5	<u></u>	
(Date	of incorporation)	(Date of duration, if other than perpetual)	
Upon Regis	tration		
		in Florida, if prior to registration) 1502, F.S., to determine penalty liability)	
29 Industrial	Blvd., Mc Rae Helena, GA 31055		
-	(Principal o	ffice street address)	
PO Box 554	77, Mc Rae Helena, GA 31055		
	(Current mai	ing address, if different)	
Name:	et address of Florida registered agent: (Plancorp Services, Inc.	.O. Box <u>NOT</u> acceptable)	2022 MAY -4 SECKL TOKE ! TALL AHASSE
Name:	InCorp Services, Inc. 17888 67th Court North		7887 1975 11-11
Name:	InCorp Services, Inc. 17888 67th Court North	O. Box NOT acceptable) , Florida 33470 (Zip code)	2022 MAY - 4 AM 10: 49 SECKL WASSEELT LURIDA
Name: Office Address: Registered aglaving been nameslenated in this	InCorp Services, Inc. 17888 67th Court North Loxahatchee	33470, Florida, Cip code) wice of process for the above stated continent as registered agent and agree to the proper and complete p	SSEEL TLURIDA orporation at the plan of act in this capaciti
Name: ffice Address: Registered agive and the second agrees of the second agrees agree to contact the second agree to contact agree to contact agree to contact agree to contact agree agree to contact agree agree to contact agree agree agree agree agree to contact agree agre	InCorp Services, Inc. 17888 67th Court North Loxahatchee (City) ent's acceptance: and as registered agent and to accept ser application, I hereby accept the appoint comply with the provisions of all statutes	33470, Florida, Cip code) wice of process for the above stated continent as registered agent and agree to the proper and complete p	orporation at the plan act in this capacities erformance of my of

^{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: Charles Hutcheson	□Chairman 3	Name:	
□Vice Chairman	Address: 293 Hwy 280 W	□ Vice Chairman	Address:	1074 E Golden Isles Hwy
□Director	Mc Rae, GA 31055	■ Director		Mc Rae, GA 31055
≝ President		□President ()		
□Vice President		□Vice President		
Secretary	□Treasurer	☐ Secretary		☐ Treasurer
Other	Other	Other		□Other
□Chairman	Name:	□Chairman '		· ·
□Vice Chairman	Address:	☐ Vice Chairman	Address:	
Director		Director		
□President		President		
□Vice President	•••	□Vice President		
Sccretary	Treasurer	□Secretary ·		□Treasurer
Other		□Other		□Other
□ Chairman	Name:	□Chai rm an	Name:	
	Address:			
Director		Director		
□ President		□ President		
_		□Vice President		
Secretary	□Treasurer	□Secretary ·		Treasurer
□Other	Other	Other		□Other
Important Notice: I individuals may be	Use an attachment to report more than six (6). The attachment to the index when filing your Florida Department	nt of State Annual R	epart form.	
\ -	Signature of Director of	r Officer		
The officer or direct she is aware that fa 6.817.155, F.S.	ctor signing this document (and who is listed in number lise information submitted in a document to the Depart	r 11 above) affirms the ment of State constitu	hat the facts utes a third	s stated herein are true and that he or degree felony as provided for in
	Chad Hutcheson, D	irector		

Control Number: 0356192

STATE OF GEORGIA

Secretary of State

Corporations Division
313 West Tower
2 Martin Luther King, Jr. Dr.
Atlanta, Georgia 30334-1530

CERTIFICATE OF EXISTENCE

I, Brad Raffensperger, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

MORGAN WINDOW & GLASS, INC.

a Domestic Profit Corporation

was formed in the jurisdiction stated below or was authorized to transact business in Georgia on the below date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

Docket Number : 23167877
Date Inc/Auth/Filed: 10/14/2003
Jurisdiction : Georgia
Print Date : 05/03/2022

Form Number : 211



Brad Rafforspage

Brad Raffensperger Secretary of State