

# F23000001747

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

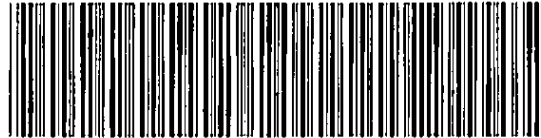
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2023 MAR 24 PM 12:26  
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FLORIDA

MAR 27 2023

K. Brumley

CORPORATION SERVICE COMPANY  
1201 Hays Street  
Tallahassee, FL 32301  
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 610275 7918422

AUTHORIZATION :

COST LIMIT : \$ 70.00



ORDER DATE : March 24, 2023

ORDER TIME : 1:49 PM

ORDER NO. : 610275-005

CUSTOMER NO: 7918422

FOREIGN FILINGS

NAME: MOISTURESHIELD, INC.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

       CERTIFIED COPY  
XX        PLAIN STAMPED COPY  
       CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Eyliena Baker -- EXT#

EXAMINER: \_\_\_\_\_

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** MoistureShield, 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:

Jennifer Parks

\_\_\_\_\_  
Name of Person

CRH Americas, Inc.

\_\_\_\_\_  
Firm/Company

900 Ashwood Parkway, Suite 600

\_\_\_\_\_  
Address

Atlanta, GA 30338

\_\_\_\_\_  
City/State and Zip code

jennifer.parks@crh.com

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

For further information concerning this matter, please call:

Jennifer Parks

at ( 470 ) 590-1640

\_\_\_\_\_  
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. MoistureShield, Inc.  
(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)

2. Delaware 3. 71-0675758  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 12/02/1988 5. \_\_\_\_\_  
(Date of incorporation) (Date of duration, if other than perpetual)

6. 01/01/2023  
(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 914 N. Jefferson Street, Springdale, AR 72764  
(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)

**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.*

Corporation Service Company

By: [Signature]

(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]:

APPROVED  
AND  
FILED  
2023 MAR 24 PM 12:26

**A. DIRECTORS**☐Chairman Name: See attached☐Vice Chairman Address: \_\_\_\_\_☐Director \_\_\_\_\_☐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 \_\_\_\_\_☐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 \_\_\_\_\_☐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.

A7796159710E4DC...

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. David M. Toolan, Assistant Secretary

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

Name	Title	Primary Business Address
Chris Jones	Vice President	914 N. Jefferson Street, Springdale, AR 72764
David C. Lewis	Assistant Secretary	900 Ashwood Pkwy, Suite 600, Atlanta, GA 30338
David M. Toolan	Assistant Secretary	900 Ashwood Pkwy, Suite 600, Atlanta, GA 30338
Jason Stoyanov	Chief Financial Officer	914 N. Jefferson Street, Springdale, AR 72764
Ken O'Neill	Chief Operating Officer	400 Perimeter Center Terrace, Suite 1000, Atlanta, GA 30346
Michael F. Deaton	Assistant Secretary	900 Ashwood Pkwy, Suite 600, Atlanta, GA 30338
Nathan Creech	Director	5005 LBJ Freeway, Suite 1050, Dallas, TX 75244
Paul R. Valentine	Treasurer	900 Ashwood Pkwy, Suite 600, Atlanta, GA 30338
Richard Lankester	President	914 N. Jefferson Street, Springdale, AR 72764
Sile Morrissey	Secretary	400 Perimeter Center Terrace, Suite 1000, Atlanta, GA 30346
Tim George	Assistant Secretary	900 Ashwood Pkwy, Suite 600, Atlanta, GA 30338
Timothy Ortman	Chief Executive Officer	400 Perimeter Center Terrace, Suite 1000, Atlanta, GA 30346
Timothy Ortman	Director	400 Perimeter Center Terrace, Suite 1000, Atlanta, GA 30346
William P. Jones	Assistant Secretary	900 Ashwood Pkwy, Suite 600, Atlanta, GA 30338

# Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "MOISTURESHIELD, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE SIXTEENTH DAY OF MARCH, A.D. 2023.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "MOISTURESHIELD, INC." WAS INCORPORATED ON THE SECOND DAY OF DECEMBER, A.D. 1988.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.



2179925 8300

SR# 20231032848

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

A handwritten signature in black ink, appearing to read "JBULLOCK", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed.

Authentication: 202937635

Date: 03-16-23