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| (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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JUN - 9 2023

COVER LETTER

• • • • •

| TO: Registration Section Division of Corporations | | | | |
|---|--|--|--|--|
| SUBJECT: Industrial Builders, Inc. | | | | |
| Name of corporation | - must include suffix | | | |
| Dear Sir or Madam: | | | | |
| The enclosed "Application by Foreign Corporation for A "Certificate of Existence," or "Certificate of Good Standabove referenced foreign corporation to transact business | ling" and check are submitted to register the | | | |
| Please return all correspondence concerning this matter | to the following: | | | |
| Evelyn Baker Name of F |) | | | |
| Industrial Builders, Inc | rerson | | | |
| Firm/Comp | nany | | | |
| PO Box 97 | ,,,,,, | | | |
| Addre | SS | | | |
| Caldwell, ID 83606 | | | | |
| City/State an | nd Zip code | | | |
| evelyn@ib-usa.com | | | | |
| E-mail address: (to be used for | or future annual report notification) | | | |
| For further information concerning this matter, please ea | all: | | | |
| Evelyn Baker 208 | n Baker 208 795-5670 | | | |
| 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 \$\Boxed{\text{S70.00}}\$ \$ \$70.00 \text{ Filing Fee} \$\Boxed{\text{Certificate of Status}}\$ | OF STATE \$78.75 Filing Fee & \$87.50 Filing Fee, Certified Copy 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.

| ι. | Industrial Builde | | | |
|-----|--|--|--|----------------------------|
| • • | (Enter name of co "Inc.," "Co.," "Co | orporation; must include "INCORPORATED, orp," "Inc," "Co," or "Corp.") | " "COMPANY." "CORPORAT | ION," |
| | (If name unavaila | ble in Florida, enter alternate corporate name | adopted for the purpose of transa | cting business in Florida) |
| 2. | Idaho | | 20-8121767 | |
| ۷. | (State or country under the law of which it is incorporated) | | (FEI number, if applicable) | |
| 4. | 12/29/2006 | of incorporation) 5. | | |
| | (Date | of incorporation) | (Date of duration, if of | her than perpetual) |
| 6. | · | | | |
| | | (Date first transacted business i (SEE SECTIONS 607.1501 & 607.1 | in Florida, if prior to registration) -502, F.S., to determine penalty li | ability) |
| 7 | 522 Dauntless I | Place Caldwell, ID 83605 | | |
| 1. | | (Principal of | fice street address) | 702 |
| | PO Box 97 Cal | ldwell, ID 83606 | | 2023 K |
| | | (Current maili | ing address, if different) | 3 O PH 4: 2 |
| 8 | . Name and stree | et address of Florida registered agent: (P. | O. Box <u>NOT</u> acceptable) | Pii |
| | Name: | CT Corporation System | | |
| C | Office Address: | 1200 S. Pine Island Rd. | | 22 |
| | | Plantation | . Florida | _ |
| | | (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.

(Registered agent's signature) Knwb2/Ny Proven's

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.

| A. DIRECTORS | Dave Erlebach Name: | □Chairman Name: | |
|------------------------------------|--|----------------------------------|---|
| □Chairman | 17080 Stiehl Creek Dr. | | |
| □Vice Chairman | Address: | ☐Vice Chairman Address: | |
| □Director | Nampa, ID 83687-5213 | Director | |
| 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 |
| □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 individuals may b | Use an attachment to report more than six (6). The a be added to the index when filing your Florida Depart W Signature of Director | ment of State Annual Report form | orting purposes only. Non-indexed n. |

The officer or director signing this document (and who is listed in number 11 above) aftirms 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 IDAHO

Phil McGrane | Secretary of State **Business Office** 450 North 4th Street PO Box 83720 Boise, ID 83720

May 24, 2023

Request Type: Certificate of Existence/Filing

Issuance Date: 05/24/2023

Request #:

0005250102

Copies Requested:

Receipt #:

000829181

Regarding:

INDUSTRIAL BUILDERS, INC

General Business Corporation (D)

File #:

517182

Filing Type:

Formation/Qualification Date: 12/29/2006

Status:

Active-Good Standing

Formation Locale: IDAHO Inactive Date:

Duration Term:

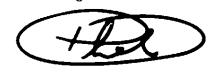
Perpetual

Certificate of Existence

I, Phil McGrane, Secretary of State of the State of Idaho, do hereby certify that effective as of the issuance date noted above

INDUSTRIAL BUILDERS, INC

is a Corporation duly incorporated under the law of this State with a date of incorporation and duration as given above.



Phil McGrane

Idaho Secretary of State

Processed By: Business Division Verification #: 023864432

Phone: 208-334-2301 * Email: business@sos.idaho.gov * Website: sosbiz.idaho.gov