## F24000004021

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Special Instructions to F	iling Officer:	
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 $\mathbb{P}^{n-1}([0], \mathbb{C}^2 + \cdots \mathbb{C}^n_{n-1}([0], \mathbb{C}^2 + \cdots \mathbb{C}^n_{n-1}]) 4 = \bullet \bullet \mathbb{P}^n_{[0], \mathbb{C}^n_{n-1}} \mathbb{P}^n_{\mathbb{C}^n_{n-1}} \mathbb$ 

SECRETARY OF STATE ONE SHALLONE OF COURT CALLIONS



July 8, 2024

LAUREN MILLER 1948 BEAUMONT DRIVE BATON ROUGE, LA 70806 US

SUBJECT: BIG RIVER GLASS, INC. Ref. Number: W24000099483

We have received your document for BIG RIVER GLASS, INC. and check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

You must list the names and street addresses of the officers and directors of the corporation on the form/application.

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

Letter Number: 124A00014689

Ariel Jones Regulatory Specialist II

## **COVER LETTER**

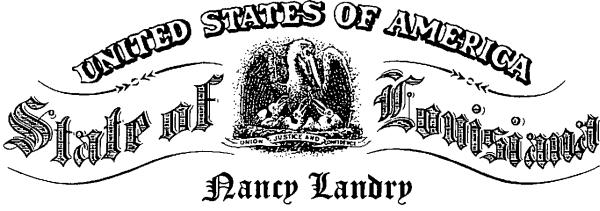
TO: Registration Section Division of Corporations	
SUBJECT: BIA RIVUR GLASS, MC	
Name of corporation - must include suffix	
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation for Authorization to Transact "Certificate of Existence," or "Certificate of Good Standing" and check are submabove referenced foreign corporation to transact business in Florida.	
Please return all correspondence concerning this matter to the following:	
Lauren Miller	
Name of Person	
big KIVER Glass, Inc.	
Firm/Company	
1948 Blaumont DRIVE	<del></del>
Baton Rouge, 4 70804	
City/State and Zip code	
E-mail address: 40 be used for future annual report not	diffication)
For further information concerning this matter, please call:	· · · · · · · · · · · · · · · · · · ·
Name of Person at (318) 471-975  Area Code Daytime Telepho	ne Number
STREET/COURIER ADDRESS:  Registration Section  Division of Corporations  The Centre of Tallahassee  2415 N. Monroe Street, Suite 810  Tallahassee, FL 32303  MAILING AD  Registration Section  Division of Corporations  Division of Corporation of Co	ction porations
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 & \$ \$78.75 Filing Fee & Certificate of Status Certified Copy	S87.50 Filing Fee, Certificate of Status & Certified Copy

## APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

I. Enter name of co	REIGN CORPORATION TO THE	ransact busi NC ,	THE FOLLOWING IS SUBMITS NESS IN THE STATE OF FLORIDA.  OMPANY," "CORPORATION,"	
(If name unavaila	able in Florida, enter alternate cor	porate name adopt	ed for the purpose of transacting business	in Florida)
2. UN/	USIWA	3.	72-101017-92	
	y under the law of which it is inco	rporated)	(FEI number, if applicable)	<del></del>
4. 10-7	30 - 19 <i>95</i>	5.		
(Date	of incorporation)	<u></u>	(Date of duration, if other than perpetu	ual)
6.				
	(Date first transacte	d business in Flor	ida, if prior to registration)	<del></del>
1/1/10 b	(SEE SECTIONS 607.13	501 & 607.1502, F	S., to determine penalty liability)	
7. M40 K	ZULIYIDVIT UKIVE	, buton	RUNGE, IA 10804	
	(1	Principal office st	cet address)	21 IVIC
		***		Sio
	(C	urrent mailing add	lress, if different)	JUL 30
9 Name and street			NOT ALL.	- 00
o. Maine and stree	et address of Florida registered	agent: (P.O. Bo	x NOT acceptable)	구 · · · · · · · · · · · · · · · · · · ·
Name:	KENTOLKED TOYEL	/113 IVC.		2: 5 2: 5 2: 5 2: 5 3: 5 3: 5 3: 5 3: 5 3: 5 3: 5 3: 5 3
Office Address:	79014thStN	SIEAT	)	10H5 28
Office / tadiess.	Of Potalogical	20	227 22	
	3 PENERSIVIII	24	, Florida 55 TOZ	
	(City)	J	(Zip code)	
9. Registered age				
			process for the above stated corporations as registered agent and agree to act in	
			us registered agent and agree to act in oe to the proper and complete perform	
	with and accept the obligation			
	David Xaberts	Assistant	Secretary	
_	(Register	red agent's signatu	re)	

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				
□Chairman	Name: Erun Henley	□Chairman	Name:	•
□Vice Chairman	Address: 13435 Kimbleton Ave	□Vice Chairman		
□Director	Baton Rouge, 1A 70817	□Director		
<b>⊠</b> President	Erin Henley	□President		
□Vice President		□Vice President		<u>.</u>
☐ 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	<del></del>	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 be	Use an attachment to report more than six (6). The attac added to the index when filing your Florida Departmen	it of State Annual Re	port form.	rposes only. Non-indexed
12	Co Stend			
she is aware that fa s.817.155, F.S.	Signature of Director or Signature of Director or Signing this document (and who is listed in number else information submitted in a document to the Department of the Departm	11 above) affirms the nent of State constitu	tes a third degree	felony as provided for in
13	(Typed or printed name and capacity of person	n signing application	)	



SECRETARY OF STATE

As Secretary of State, of the State of Louisiana I do hereby Certify that

the Articles of Incorporation of

## **BIG RIVER GLASS, INC.**

Domiciled at BATON ROUGE, LOUISIANA,

Was filed in this Office and a Certificate of Incorporation was issued on October 30, 1985.

I further certify that no Certificate of Dissolution or Termination has been issued.

In testimony whereof, I have hereunto set my hand and caused the Seal of my Office to be affixed at the City of Baton Rouge on,

June 24, 2024

Certificate ID: 11900053#7QK73

To validate this certificate, visit the following web site, go to Business Services, Search for Louisiana Business Filings, Validate a Certificate, then follow the instructions displayed.

www.sos.la.gov

Mancy Fandry

Secretary of State

Web 34189703D