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	(Requestor's Name)
	(Address)
<u> </u>	
	(Address)
	(City/State/Zip/Phone #)
	(City/State/Zip/Priorie #)
PICK-UF	WAIT MAIL
	(Business Entity Name)
	(Sashess Carry Harris)
	(Document Number)
Certified Copies	Certificates of Status
Special Instructions to	Filing Officer:

Office Use Only



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NEOTIVED 24 SEP 17 PM 31 CSC - Tallahassee CSC 1201 Hays Street 1 allahassee, FL 32301-2607

• 850-558-1500, Ext: x61563

To: Department Of State, Division Of Corporations

From: Shauna Godbolt

Ext: x61563 Date: 09/17/24 Order #: 1626054-1

Re: Valcourt Exterior Building Services of West Palm Beach, LLC

Processing Method: Routine

TO WHOM IT MAY CONCERN:

Enclosed please find:

Certificate of Formation/Incorporation

Amount to be deducted from our State Account: \$155 - FL State Account

12000000195

CC

Please take the following action:

File in your office on basis Issue Proof of Filing

Special Instructions:

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

COVER LETTER

TO:	New Filing Section Division of Corporations	
SUBJE	Valcourt Exterior Building Services of	West Palm Beach, LLC
300,1		ted Liability Company
The en	closed Articles of Organization and fee(s) are	submitted for filing.
Please	return all correspondence concerning this matt	er to the following:
	Heather Papaleo	
		Name of Person
	Troutman Pepper Hamilton Sanders LLI	Firm/Company
		Firm/Company
	3000 Two Logan Square	· · · · · · · · · · · · · · · · · · ·
		Address E. F. Ale
	Philadelphia. PA 19103	1 A C C C C C C C C C C C C C C C C C C
	City heather.papaleo@troutman.com	y/State and Zip Code
		or future annual report notification)
For furth	er information concerning this matter, please of	
Or ruren	er mormaton concerning this matter, please c	
	Heather Papaleo at (981-4787
	Name of Person Are	a Code Daytime Telephone Number
Enclose	ed is a check for the following amount:	
□\$12:	5.00 Filing Fee	■\$155.00 Filing Fee & □\$160.00 Filing Fee, Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address New Filing Section Division The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FI, 32303

ARTICLE I - Name: The name of the Limited Liability Company is: Valcourt Exterior Building Services of West Palm Beach. LLC (Must contain the words "Limited Liability Company, "L.L.C.," or "L.L.C.,"

another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

Name

120 Hays Street

Florida street address (P.O. Box NOT acceptable)

Tallahassee Florida 32301
City State Zip

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate. 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

"AMBR" = Authorized Member "MGR" = Manager	Name and Address:
AMBR	Valcourt Intermediate Holdings, LLC 4200 Research Forest Drive, Suite 400 The Woodlands, TX 77381
AR	Eric Crabb 4200 Research Forest Drive, Suite 400 The Woodlands, TX 77381
<u>AR</u>	Christopher Howard 4200 Research Forest Drive. Suite 400 The Woodlands, TX 77381
<u>AR</u>	David Rodefeld
(Use attachment if necessary)	1200 Research Forest Drive, Suite 400 The Woodlands, TX 77381 The Woodlands, TX 77381 The Woodlands TX 77381
an effective date is listed, the date must be sp e date of filing.) ote: If the date inserted in this block does not a	pecific and cannot be more than five business days prior to or 90 days af
an effective date is listed, the date must be specular of filing.) ote: If the date inserted in this block does not a document's effective date on the Department	pecific and cannot be more than five business days prior to or 90 days af
an effective date is listed, the date must be spe date of filing.) ote: If the date inserted in this block does not a document's effective date on the Department RTICLE VI: Other provisions, if any.	pecific and cannot be more than five business days prior to or 90 days af
an effective date is listed, the date must be special date of filing.) ote: If the date inserted in this block does not recomment's effective date on the Department RTICLE VI: Other provisions, if any. REOUIRED SIGNATURE:	meet the applicable statutory filing requirements, this date will notice liste of State's records.
an effective date is listed, the date must be speed date of filing.) ote: If the date inserted in this block does not recomment's effective date on the Department RTICLE VI: Other provisions, if any. REOUIRED SIGNATURE: Signature of a metal This document is executed any false.	meet the applicable statutory filing requirements, this date will notice liste of State's records.
REQUIRED SIGNATURE: Signature of a me This document is execu I am aware that any false	meet the applicable statutory filing requirements, this date will notice liste of State's records. Table the property of a member of an authorized representative of a member, and in accordance with section 605.0203 (1) (b), Florida Statutes, are information submitted in a document to the Department of State