

NO3 000000428

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

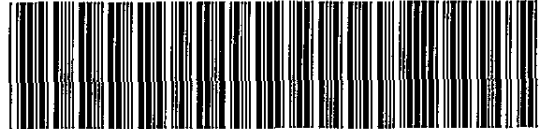
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STATE
CORPORATIONS
TALLAHASSEE, FLORIDA

FILED
03 FEB -3 PM 4:51
TALLAHASSEE, FLORIDA

CT CORPORATION

February 3, 2003

Secretary of State, Florida
409 East Gaines Street
Tallahassee FL 32399

FILED
03 FEB - 3 PM 4:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Re: Order #: 5771439 SO
Customer Reference 1:
Customer Reference 2:

Dear Secretary of State, Florida:

Please file the attached:

~~KraftMaid Sales and Distribution, LLC (DE)~~
Registration
Florida

Enclosed please find a check for the requisite fees. Please return evidence of filing(s) to my attention.

If for any reason the enclosed cannot be filed upon receipt, please contact me immediately at (850) 222-1092. Thank you very much for your help.

Sincerely,

Ashley A Mitchell
Fulfillment Specialist
Ashley_Mitchell@cch-lis.com

660 East Jefferson Street
Tallahassee, FL 32301
Tel. 850 222 1092
Fax 850 222 7615

FILE
SECOND
PLEASE

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACTION BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACTION BUSINESS IN THE STATE OF FLORIDA:

1. KraftMaid Sales and Distribution, LLC
(Name of foreign limited liability company)

2. Delaware 3. 31-1536519
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. 12-12-02 5. Perpetual
(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")

6. Upon Filing
(Date first transacted business in Florida. See sections 608.501, 608.502, and 817.155, F.S.)

7. 16052 Industrial Parkway,
Middlefield, Ohio 44062
(Street address of principal office)

8. If limited liability company is a manager-managed company, check here ☒

9. The usual business addresses of the managing members or managers are as follows:

Raymond F. Kennedy 21001 Van Born Road, Taylor, Michigan 48183
Eugene A. Gargaro, Jr. 21001 Van Born Road, Taylor, Michigan 48183
John R. Leekley 21001 Van Born Road, Taylor, Michigan 48183

10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.)

11. Nature of business or purposes to be conducted or promoted in Florida: Sales support

Eugene A. Gargaro, Jr.

Signature of a member or an authorized representative of a member.
(In accordance with section 608.403(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Eugene A. Gargaro, Jr., Manager

Typed or printed name of signee

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES,
THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING
STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN
THE STATE OF FLORIDA.

1. The name of the limited liability company is: Kraftmaid Sales and Distribution, LLC

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

CT Corporation System
NAME
1200 South Pine Island Road
Florida street address (P. O. Box NOT ACCEPTABLE)
Plantation FL 33324
CITY, STATE AND ZIP

FILED
03 FEB -3 PM 4:52
TALLAHASSEE, FLORIDA

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.

Connie Bryan **CONNIE BRYAN**
SIGNATURE **SPECIAL ASSISTANT SECRETARY**

Filing Fee: \$ 35 for Designation of Registered Agent

JAN-31-2003 12:06

C T CORPORATION

248 646 9034 P.07/07

Delaware

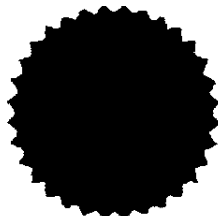
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The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "KRAFTMAID SALES AND DISTRIBUTION, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE THIRTY-FIRST DAY OF JANUARY, A.D. 2003.

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

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



Harriet Smith Windsor

Harriet Smith Windsor, Secretary of State

2755814 8300

AUTHENTICATION: 2235513

030065401

DATE: 01-31-03

TOTAL P.07