M04000000712

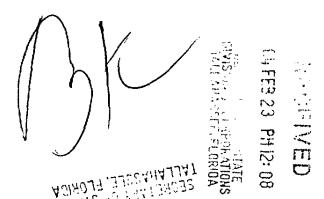
(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					

Office Use Only



500028124235

U2723704 - 01055 - 021 **125.00



04 EB 53 64 3 01 EITED

CT CORPORATION SYSTEM

660 East Jefferson Street
Tallahassee, FL 3230February 23, 2004
Tel. 850 222 1092
Fax 850 222 7615

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

Re: Order #: 6042587 SO Customer Reference I:

Customer Reference 2: 214 880-3511

Dear Secretary of State, Florida:

Please file the attached:

Builders FirstSource-Florida, 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,

Jeffrey J Netherton Sr. Fulfillment Specialist Jeff_Netherton@cch-lis.com

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

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

1.	Builders FirstSource - Florida, LLC				
- •	(Name of foreign limited liability company)				
2	Delaware 3. 52-2172981				
	(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable)				
4.	12/31/2003 5 Perpetual				
••	(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")				
6.	01/01/2004				
	(Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.)				
7.	2451 Highway 501 East, Conway, SC 29526				
	(Street address of principal office)				
8.	. If limited liability company is a manager-managed company, check here 🗷				
9.	The name and usual business addresses of the managing members or managers are as follows:				
	Paul S. Levy, 450 Lexington Ave., Suite 3350, New York, NY 10017				
	Brett N. Milgrim, 450 Lexington Ave., Suite 3350, New York, NY 10017				
	Ramsey Frank, 450 Lexington Ave., Suite 3350, New York, NY 10017				
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 eath of the translator must be submitted.) 				
11	. Nature of business or purposes to be conducted or promoted in Florida:				
	Manufacturer and wholesale distributor of building products				
	7/20/04				
	Signature of a member or an authorized representative of a member.				
	(In accordance with section 608.408(3), F.S., the execution of this document constitutes				
	an affirmation under the penalties of perjury that the facts stated herein are true.)				
	Typed or printed name of signee				
	Typed of printed name of signee				

· Attachment Page 1 of 1

Attachment to North Carolina

Member / Manager Information

1. Full Name:

Member/Manager: Business Address:

City: State: ZIP Code: Floyd Sherman Manager 2001 Bryan Street, Suite 1600 Dallas TX 75201

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 Comp	any is:		
Builders FirstSe	ource - Florida, LLC			
2. The name	and the Florida street address	of the registered agent and office are:		
	C T Corporation System			
	(Name)			
	c/o C T Corporation System, 1200 South Pine Island Road			
	Florida street address (P.O. Box NOT ACCEPTABLE)			
	Plantation	FL 33324		
	(City/State/Zip)			
liability comp registered age statutes relati	any at the place designated in the capa and agree to act in this capa age to the proper and complete placetions of my position as regis	to accept service of process for the above stated limited his certificate, I hereby accept the appointment as acity. I further agree to comply with the provisions of a performance of my duties, and I am familiar with and attered agent as provided for in Chapter 608, F.S.		
	(Signature) Michael E. Jones			
/		Assistant Secretary		
(\$ 100.00 \$ 25.00	Filing Fee for Application Designation of Registered Agent		
	\$ 25.00 \$ 30.00	Designation of Registered Agent Certified Copy (optional)		
	\$ 5.00	Certificate of Status (ontional)		

PAGE 1

Delaware

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "BUILDERS FIRSTSOURCE-FLORIDA, 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 TWENTIETH DAY OF FEBRUARY, A.D. 2004.

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.

Warriet Smith Hindson
Harriet Smith Windson, Secretary of State

AUTHENTICATION: 2943056

DATE: 02-20-04

3048031 8300

040122719