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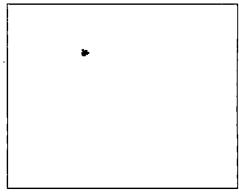
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SECRETARY OF SIA

FLORIDA RESEARCH & FILING SERVICES, INC. 1211 CIRCLE DRIVE TALLAHASSEE, FL 32301 PHONE (850)656-6446



OFFICE USE ONLY

WALK-IN

ENTITY NAME:

1. GENFLEX ROOFING SYSTEMS, LLC

CK# 2197

AMOUNT \$155.00

PLEASE FILE THE ATACHED QUALIFICATION & RETURN THE FOLLOWING:

XXX CERTIFIED COPY

____ STAMPED COPY

CERTIFICATE OF STATUS

Examiner's Initials

TRANSMITTAL LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Genflex Roofing Systems, LLC	
	ited Liability Company)
	bility Company for Authorization to Transact Business in bmitted to register the above referenced to reign Thmited
Please return all correspondence concerning this m	atter to the following:
(Nar	ne of Person)
Paranet Corporation Services, Inc.	
(Fin	m/Company)
3761 Venture Drive, Suite 260	
	(Address)
Duluth, GA 30096	
(City/Sta	ate and Zip Code)
For further information concerning this matter, plea	ase call:
	at (<u>800</u>) <u>277-9977</u>
(Name of Person)	(Area Code & Daytime Telephone Number)
STREET ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
409 E. Gaines Street	P.O. Box 6327
Tallahassee, Florida 32399	Tallahassee, Florida 32314
Enclosed is a check for the following amount:	
☐ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate of	 ✓ \$155.00 Filing Fee & ☐ \$160.00 Filing Fee, Certificate Status Certified Copy of Status & Certified Copy

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:

Genflex Roofing Systems, LLC (Name of Foreign Limited	l Lia	bility Company)	
, ,		1	96
Indiana (Jurisdiction under the law of which foreign limited liability	, 3 .	(FEI number, if applicable)	- B
company is organized)		E.	
August 8, 2006	5.	Perpetual	<u> </u>
(Date of Organization)		(Duration: Year limited liability company wile exist or "perpetual")	rcease to
Upon qualification			45 O
(Date first transacted business in (See sections 608.501 & 608.502 F	Flor	ida, if prior to registration.)	100°
·	.5. 1	o determine penanty natinty)	P
310 East 96th Street			
Indianapolis, IN 46240			
(Street Addre	ss o	f Principal Office)	
. If limited liability company is a manager-manage	eđ c	omnany check here	
Trimmed manney company to a manager manager			
. The name and usual business addresses of the ma	ana	ging members or managers are as follow	s:
Michael Gorey, 310 East 96th Street, Indianapolis, Il	N 40	3240	
		- 40	
Clair McClory, 310 East 96th Street, Indianapolis, IN	1 46	240	
John Vasuta, 310 East 96th Street, Indianapolis, IN	462	40	
, ,			
0. Attached is an original certificate of existence, no more than 9			
ne jurisdiction under the law of which it is organized. (A photoco anslation of the certificate under oath of the translator must be s			uguage, a
delication of the extended disease out of the section in the control of the section of the secti			
1. Nature of business or purposes to be conducted	or	promoted in Florida:	
Any legal and lawful purpose for which a LLC may be	ого	ganized pursuant to the Act.	,
John W	·/e	ute.	,
		horized representative of a member.	
		S., the execution of this document constitutes ry that the facts stated herein are true.)	
John Vasuta, Manager	•		
	4 - 1	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:	
Genflex Roofir	ng Systems, LLC		
2. The name a	and the Florida street ad	ddress of the registered agent and office are:	
	NRAI Services, Inc.		<u></u>
		(Name)	
	2731 Executive Park I		
	Florida Str	reet Address (P.O. Box NOT ACCEPTABLE)	
	Weston	FL 33331	
		City/State/Zip	
liability compo agent and agr relating to the	any at the place designat ree to act in this capacity. proper and complete pe my position as registered	nt and to accept service of process for the above ted in this certificate, I hereby accept the appoir I further agree to comply with the provisions of erformance of my duties, and I am familiar with d agent as provided for in Chapter 608, Florida	ntment as registered of all statutes and accept the

(Signature)

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

STATE OF INDIANA OFFICE OF THE SECRETARY OF STATE CERTIFICATE OF EXISTENCE

To Whom These Presents Come, Greeting:

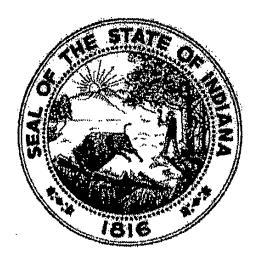
I, TODD ROKITA, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana, the custodian of the corporate records and the proper official to execute this certificate.

I further certify that records of this office disclose that

GENFLEX ROOFING SYSTEMS, LLC

duly filed the requisite documents to commence business activities under the laws of the State of Indiana on August 08, 2006, and was in existence or authorized to transact business in the State of Indiana on October 12, 2006.

I further certify this Domestic Limited Liability Company (LLC) has filed its most recent report required by Indiana law with the Secretary of State, or is not yet required to file such report, and that no notice of withdrawal, dissolution or expiration has been filed or taken place.



In Witness Whereof, I have hereunto set my hand and affixed the seal of the State of Indiana, at the City of Indianapolis, this Twelfth Day of October, 2006.

TODD ROKITA, Secretary of State