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EXAMINER

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#### **COVER LETTER**

TO: Registration Section

SUBJECT: Sealed-Tite, LLC	
	nited Liability Company)
Please return all correspondence concerning this r	ame of Person)
Gregory Allen Gast	Fr. 3
(N	ame of Person)
Sealed-Tite, LLC	
(Fi	rm/Company)
10046 Dahlia Avenue	
	(Address)
Palm Beach Gardens, Flo	rida 33410 tate and Zip Code)
For further information concerning this matter, pl	ease calls
To further information concerning this matter, pr	ease can.
Gregory Allen Gast	at ( 561 ) 846-1904
(Name of Person)	(Area Code & Daytime Telephone Number)
MAILING ADDRESS: Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	STREET ADDRESS: Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301
Enclosed is a check for the following amount:  \$\sumsymbol{\sumsymbol{Z}}\$125.00 Filing Fee \text{\$\sumsymbol{\sumsymbol{Z}}\$130.00 Filing Fee \text{\$\text{\$\cute{Certificate of the following amount:}}}	

### 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. Sealed-Tite, LLC  (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")	<del></del>
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Li Company," "L.L.C.," "LLC.")	
2. Delaware 3. 26-1885194	
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)	
4. January 30, 2008 <sub>5.</sub> Perpetual	
(Date of Organization) (Duration: Year limited liability company will cease exist or "perpetual")	to
6. N/A	-
(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)	<del></del>
7. 10046 Dahlia Avenue	
Palm Beach Gardens, Florida 33410	THE DE
(Street Address of Principal Office)	<u>ج</u>
8. If limited liability company is a manager-managed company, check here	9: 55
9. The name and usual business addresses of the managing members or managers are as follows:	
Christopher A. Gast- MGR	
4211 San Marino Blvd. Apt 304	
West Palm Beach, Florida 33409	
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language 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: Any and all lawful	
business- construction, roofing	_
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

Christopher A. Gast

## 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 o	f the Limited Liability Company is:
Sealed-Tite	e, LLC
If name unavai	lable, the alternate name to be used in the state of Florida is:
2. The name a	nd the Florida street address of the registered agent and office are:
	Christopher Allen Gast
	(Name)
	10046 Dahlia Avenue
	Florida Street Address (P.O. Box NOT ACCEPTABLE)
	Palm Beach Gardens 33410 FL
	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 608, Florida Statutes.

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

PAGE 1

# Delaware

#### The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SEALED-TITE, 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 EIGHTH DAY OF AUGUST, A.D. 2008.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SEALED-TITE, LLC" WAS FORMED ON THE THIRTIETH DAY OF JANUARY, A.D. 2008.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

080857552

AUTHENTIA CATALONS or Secretary 4 State

DATE: 08-08-08