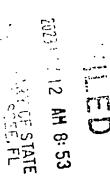
M12000005169

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

Office Use Only



500403559485



RECEIVED
123 MAY 12 M3 3: 26

CSC - Tallahassee CSC 1201 Hays Street Tallahassee, FL 32301-2607 850-558-1500, Ext: 61594

To: Department Of State, Division Of Corporations

From: Eyliena Baker

Ext: 61594 Date: 05/12/23 Order #: 1214313-1

Re: U.S. Door & Building Components, LLC

Processing Method: Routine

TO WHOM IT MAY CONCERN:

Enclosed please find:

Amount to be deducted from our State Account: \$25.00 - FL State Account Number: 120000000195

I2000000195 Authorization:

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

Division of Corporations	
SUBJECT: U.S. DOOR & BUILDING COMPONENTS, LLC	
Name of Foreign Limited Liab	ility Company
Dear Sir or Madam:	
The enclosed application, certificate and fee(s) are submitted f	for filing.
Please return all correspondence concerning this matter to the	following:
Wendy Grissom	
Name of Person	•
U.S. DOOR & BUILDING COMPONENTS, LLC	
Firm/Company	•
135 Janus International Blvd	
Address	
Temple GA 30179	
City/State and Zip Code	•
wendy.grissom@janusintl.com	
E-mail address: (to be used for future annual report notificate	tion)
For further information concerning this matter, please call:	
at ()
Name of Person Area Code	& Daytime Telephone Number
	Street Address:
	Registration Section
<u>-</u>	Division of Corporations
	The Centre of Tallahassee
	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
Enclosed is a check for the following amount:	
□\$25 Filing Fee □ \$30 Filing Fee & □ \$55 Filing I	. .
Certificate of Status Certified C	opy Certificate of Status & Certified Copy
CR2E055 (9/15)	Continua Copy



May 15, 2023

CSC

RESUBMIT

SUBJECT: U.S. DOOR & BUILDING COMPONENTS, LLC Please give original Ref. Number: M12000005169 Submission date as file date.

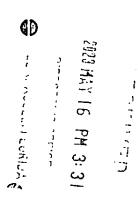
We have received your document for U.S. DOOR & BUILDING COMPONENTS, LLC and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

In the Title/Capacity the title information is cut off.

If you have any questions concerning the filing of your document, please call (850) 245-6000.

Neysa Culligan Regulatory Specialist III

Letter Number: 023A00011036



APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

SECTION I (1-4 must be completed)

1. Name of limited liability Company as it appears	ears on the records of the Florida Department of	
State: U.S. DOOR & BUILDING COMPON	ENTS, LLC	_
Enter new principal office address, if applicable	» <u></u>	_
(<u>Principal office address</u> <u>MUST BE A STREET ADDRESS</u>)	;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;	7623 F.
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	PART OF STATE FL	12 AH 8: 5
2. The Florida document number of this limited	liability company is: M12000005169	ယ
4. Date authorized to do business in Florida: SECTION II (5-9 complete only the applicab 5. New name of the limited liability company: (m) (If name unavailable, enter alternate name adoption of the written consent of the managers or must contain "Limited Liability Company," "L."	nust contain "Limited Liability Company, " "L.L.C.," or "LLC ted for the purpose of transacting business in Florida and attac managing members adopting the alternate name. The alternate	h a name
registered agent and/or the new registered office	e address here:	•
		_
New Registered Office Address:	Enter Florida Street Address	_
	, Florida	
	City Zip Code	
the provisions of all statutes relative to the prop and accept the obligations of my position as reg	gent and agree to act in this capacity. I further agree to compi per and complete performance of my duties, and I am familiar gistered agent as provided for in Chapter 605, F.S. Or, if this ge in the registered office address, I hereby confirm that the li	with

If Changing Registered Agent, Signature of New Registered Agent

Title/ Capacity	<u>Name</u>	Address	Type of Action
Authorized Person	STEPHANIE BENEFIELD	135 Janus International Blvd	□Add
		Temple GA 30179	■ Remove
Authorized Person	ANSELM WONG	135 Janus International Blvd	
		Temple GA 30179	□Remove
			□Add
			Remove
			□Add
			□Rcmove
			🗀 Add
aforemention	a certificate, if required: no more than the damendment(s), duly authenticated under the law of which this entity is or	by the official having custody of records in	□Remove
	_	of the authorized representative	12 F
		DOOR & BUILDING COMPONENTS, rinted name of signee	SSEE S
		ng Fee: \$25.00	AM 8: 53 OF STATE