

M/2000005273

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

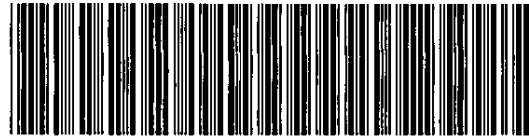
Special Instructions to Filing Officer:

A. LUNT

SEP 20 2012

EXAMINER

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09/18/12--01011--016 \*\*160.00

2012 SEP 18 PM 087  
CLERK OF STATE  
HALLANDALE BEACH, FLORIDA

FILED



**KRESKO LLC**

Office: (513) 939-0707  
Fax: (513) 829-7737

Atlanta Charlotte Cincinnati Cleveland Columbus Dayton  
Indianapolis Knoxville Louisville St. Louis Toledo

4905 Factory Dr.  
Fairfield, OH 45014

www.**KRESKO**.biz  
www.**KBR**roof.com

September 17, 2012

Division of Corporations  
Registration Section  
PO Box 6327  
Tallahassee, FL 32314

Re: Application to transact business in Florida  
Kresco LLC  
FEIN – 45-2451551

FILED  
2012 SEP 18 PM 3:57  
CLERK OF STATE  
TALLAHASSEE, FLORIDA

To Whom It May Concern:

Please consider our application to conduct business in the State of Florida. I have attached the application along with a Certificate of Good Standing from the State of Ohio. If you have any questions regarding this application, please contact me direct at (513) 829-7717. Thank you for your immediate consideration

Sincerely,

John R. Newlon  
Chief Financial Officer

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: KRESKO LLC  
Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida..

Please return all correspondence concerning this matter to the following:

JOHN NEWLON  
Name of Person  
KRESKO LLC  
Firm/Company  
4905 FACTORY DR  
Address  
FAIRFIELD OH 45014  
City/State and Zip Code  
JOHNNEWLON@KBCROOF.COM  
E-mail address: (to be used for future annual report notification)

2012 SEP 18 PM 2:07  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

For further information concerning this matter, please call:

JOHN NEWLON at (513) 829-7717  
Name of Person Area Code & Daytime Telephone Number

**MAILING ADDRESS:**  
Division of Corporations  
Registration Section  
P.O. Box 6327  
Tallahassee, FL 32314

**STREET ADDRESS:**  
Division of Corporations  
Registration Section  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

Enclosed is a check for the following amount:

☐ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate of Status ☐ \$155.00 Filing Fee & Certified Copy ☒ \$160.00 Filing Fee, Certificate of Status & Certified Copy

**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. KRESKO LLC  
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C.," "LLC.")

2. OHIO 3. 45-2451551  
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. 6/6/2011 5. PERPETUAL  
(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")

6. TBD  
(Date first transacted business in Florida, if prior to registration.)  
(See sections 608.501 & 608.502 F.S. to determine penalty liability)

7. 4905 FACTORY DRIVE  
FAIRFIELD OH 45014  
(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:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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: RESIDENTIAL  
ROOFING REPLACEMENT

John R. Newlon CFO of KRESKO LLC  
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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

JOHN R. NEWLON  
Typed or printed name of signee

2012 JUN 18 PM 2:57  
DEPARTMENT OF STATE  
CLERK HASSEL, FLORIDA  
FILED

**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:

KRESKO LLC

If unavailable, the alternate to be used in the state of Florida is:

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

C T Corporation System

(Name)

1200 South Pine Island Road

Florida Street Address (P.O. Box - **NOT** ACCEPTABLE)

Plantation

FL 33324

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.*

C T Corporation System

By:

*Diane Stout*

Diane Stout, Asst. Secretary

(Signature)

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

2012 SEP 18 PM 3:07  
CLERK OF STATE  
TALLAHASSEE, FLORIDA

FILED

**United States of America  
State of Ohio  
Office of the Secretary of State**

*I, Jon Husted, do hereby certify that I am the duly elected, qualified and present acting Secretary of State for the State of Ohio, and as such have custody of the records of Ohio and Foreign business entities; that said records show KRESCO LLC, an Ohio For Profit Limited Liability Company, Registration Number 2025700, was organized within the State of Ohio on June 06, 2011, is currently in FULL FORCE AND EFFECT upon the records of this office.*



*Witness my hand and the seal of the  
Secretary of State at Columbus, Ohio  
this 29th day of August, A.D. 2012*

*Jon Husted*

Ohio Secretary of State