





FLORIDA DEPARTMENT OF STATE  
Division of Corporations

January 10, 2014

CHRISTINA BROGAN  
37302 COMMERCE LANE  
PRAIRIEVILLE, LA 70769

SUBJECT: ROOFING SOLUTIONS OF LOUISIANA, LLC  
Ref. Number: W14000002033

We have received your document for ROOFING SOLUTIONS OF LOUISIANA, LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must submit a copy of the written consent of the managers or managing members adopting the alternate name for Florida. For your convenience, we are enclosing a fill-in-the-blank form for you to complete and return to our office for processing.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Barbara Bostick  
Regulatory Specialist II

Letter Number: 714A00000690

REC-1  
15122-2 11:10:00  
CORPORATION SERVICES

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: ROOFING SOLUTIONS, 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:

DEBRA LAVIGNE

\_\_\_\_\_  
Name of Person

ROOFING SOLUTIONS, LLC

\_\_\_\_\_  
Firm/Company

37302 COMMERCE LANE

\_\_\_\_\_  
Address

PRAIRIEVILLE, LOUISIANA 70769

\_\_\_\_\_  
City/State and Zip Code

TUPAC@ROOFINGSOLUTIONSLA.COM

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

DEBRA M LAVIGNE

\_\_\_\_\_  
Name of Contact Person

at ( 225 )

\_\_\_\_\_  
Area Code

921-5446

\_\_\_\_\_  
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 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A  
FOREIGN LIMITED LIABILITY COMPANY TO TRANSACTION BUSINESS IN THE STATE OF FLORIDA:*

1. ROOFING SOLUTIONS, LLC  
(Name of Foreign Limited Liability Company: must include "Limited Liability Company," "L.L.C.," or "LLC.")

ROOFING SOLUTIONS OF LOUISIANA, LLC  
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C.," or "LLC.")

2. LOUISIANA 3. 20-0737604  
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

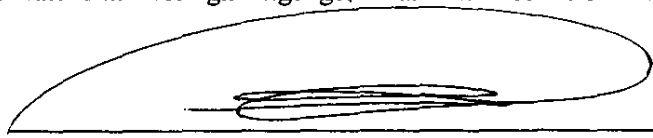
4. \_\_\_\_\_  
(Date first transacted business in Florida, if prior to registration.)  
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 37302 COMMERCE LANE  
PRAIRIEVILLE, LOUISIANA 70769  
(Street Address of Principal Office)

6. SAME AS ABOVE  
\_\_\_\_\_  
(Mailing Address)

7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:  
TUPAC DE LA CRUZ - 37302 COMMERCE LANE PRAIRIEVILLE, LA 70769 - OPERATIONS MGR  
LAUTARO DE LA CRUZ - 37302 COMMERCE LANE PRAIRIEVILLE, LA 70769 - GENERAL MGR

8. 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)

  
\_\_\_\_\_  
Signature of an authorized person

(In accordance with section 605.0203, 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.)

TUPAC DE LA CRUZ  
\_\_\_\_\_  
Typed or printed name of signee

FILED  
2015 MAR -2 PM 12:29  
TALLAHASSEE  
FLORIDA  
DEPARTMENT OF STATE

**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), 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:

ROOFING SOLUTIONS, LLC

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

ROOFING SOLUTIONS OF LOUISIANA, LLC

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

National Registered Agents, Inc.

(Name)

1200 South Pine Island Road

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

Plantation

FL 33324

City/State/Zip

FILED  
2015 MAR - 2 PM 12:29  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

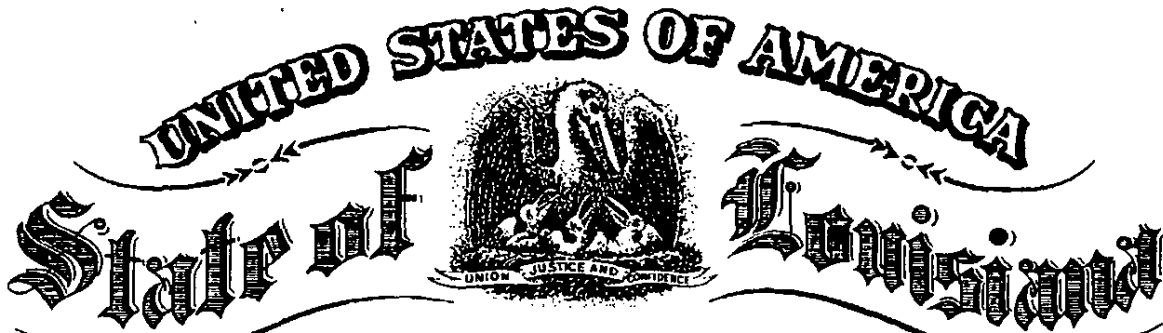
*Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all 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 605, Florida Statutes.*

By: Jayna Nickell

(Signature)

**Jayna Nickell  
Asst. Secretary**

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



**Tom Schedler**

**SECRETARY OF STATE**

*As Secretary of State of the State of Louisiana I do hereby Certify that*

**ROOFING SOLUTIONS, L.L.C.**

A limited liability company domiciled in PRAIRIEVILLE, LOUISIANA,

Filed charter and qualified to do business in this State on February 25, 2004,

I further certify that the records of this Office indicate the company has paid all fees due the Secretary of State, and so far as the Office of the Secretary of State is concerned, is in good standing and is authorized to do business in this State.

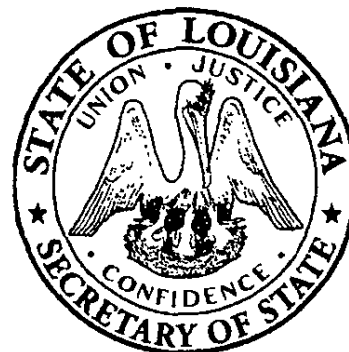
I further certify that this certificate is not intended to reflect the financial condition of this company since this information is not available from the records of this Office.

In testimony whereof, I have hereunto set my hand and caused the Seal of my Office to be affixed at the City of Baton Rouge on,

February 17, 2015

*Secretary of State*

Web 35653901K



Certificate ID: 10571871#XMJ62

To validate this certificate, visit the following web site, go to **Business Services**, **Search for Louisiana Business Filings**, **Validate a Certificate**, then follow the instructions displayed.  
[www.sos.la.gov](http://www.sos.la.gov)