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(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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(Business Entity Name)

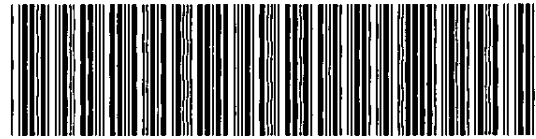
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T WASHINGTON

OCT 11 2016

Max-Flow Seamless Gutter Service, LLC

161 1/2 Prall Rd.

Fulton, NY 13069

Tel. 315/ 935-3031

TO: Florida Division of Corporations
Registration Section
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301
Tel. 850/ 245-6051

LETTER OF TRANSMITTAL

| | |
|--------------------------------------|-------------------------|
| Date: 10/7/2016 | Job no. for Max-Flow |
| ATTN. Registration Section | |
| Reference: LLC registration in FL | |

We are sending you:

- ☐ Attached ☐ Under Separate Cover ☒ FedEx Priority Overnight
- ☐ Shop drawings ☐ Prints ☐ Samples
- ☐ Specifications ☐ Change Order ☐ _____

| COPIES | DATE | NO. | DESCRIPTION |
|---------|------|------|---|
| One (1) | | 1263 | Max-Flow check for fees - \$160. |
| One (1) | | | Cover Letter |
| One (1) | | | Application |
| One (1) | | | Certificate of Existence from State of New York |

These are transmitted as checked below:

- ☐ For Approval ☒ Please Process ☐ Resubmit
- ☐ As Requested ☐ Return ☐ For Review/Comment
- ☐ For Your Use ☐ Approved as Noted ☐ Submit ____ Copies for Distribution
- ☐ For Bids Due ☐ Prints Returned/Loan to Us

REMARKS:

COPY TO

SIGNED: Thomas Anthony Jr. / md

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MAX-FLOW SEAMLESS GUTTER SERVICE, 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:

THOMAS JOSEPH ANTHONY JR.
Name of Person

MAX-FLOW SEAMLESS GUTTER SERVICE, LLC
Firm/Company

161 1/2 PRAIRIE RD.
Address

FULTON, NY 13069
City/State and Zip Code

TOM@MAXFLOWSEAMLESSGUTTERS.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

TOM ANTHONY JR. at (315) 935-3031
Name of Contact 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:

- | | | | |
|--|--|---|---|
| <input type="checkbox"/> \$125.00 Filing Fee | <input type="checkbox"/> \$130.00 Filing Fee & Certificate of Status | <input type="checkbox"/> \$155.00 Filing Fee & Certified Copy | <input checked="" type="checkbox"/> \$160.00 Filing Fee, Certificate of Status & Certified Copy |
|--|--|---|---|

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS
IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. MAX-FLOW SEAMLESS GUTTER SERVICE, LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

MAX-FLOW GUTTERS OF FLORIDA, 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. NEW YORK
(Jurisdiction under the law of which foreign limited liability company is organized)

3. 46-4750665
(FEI number, if applicable)

4. NONE
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 161 1/2 PRALL RD.
FULTON, NY 13069
(Street Address of Principal Office)

6. SAME AS ABOVE
(Mailing Address)

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: REGISTERED AGENTS INC.

Office Address: 3030 N. Rocky Point Drive, STE 150A

TAMPA, Florida 33607
(City) (Zip code)

Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Bill Havre Bill Havre/Assistant Secretary/Registered Agents Inc
(Registered agent's signature)

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

THOMAS ANTHONY JR. (MEMBER)

9. Attached is a 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. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

Thomas J. Anthony Jr.
Signature of an authorized person

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. 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.

THOMAS J. ANTHONY JR.
Typed or printed name of signee

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

State of New York Department of State } ss:

I hereby certify, that MAX-FLOW SEAMLESS GUTTER SERVICE, LLC a NEW YORK Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 02/04/2014, and that the Limited Liability Company is existing so far as shown by the records of the Department. I further certify the following:

A Certificate of Publication of MAX-FLOW SEAMLESS GUTTER SERVICE, LLC was filed on 04/08/2014.

A Biennial Statement was filed 10/05/2016.

I further certify, that no other documents have been filed by such Limited Liability Company.



*Witness my hand and the official seal
of the Department of State at the City
of Albany, this 05th day of October
two thousand and sixteen.*

Brendan W. Fitzgerald
Executive Deputy Secretary of State

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

-16 OCT 10 AM 11:46

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