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(Ci	ty/State/Zip/Phon	e #)			
PICK-UP	WAIT	MAIL			
(Business Entity Name)					
(Document Number)					
Certified Copies	_ Certificate:	s of Status			
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W17-21760	6209				

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MAR 29 2017 S. YOUNG 17 HAR 13 PM 4: 38





2017 MAR 28 PM 2: 10

Letter Number: 317A00004909

FLORIDA DEPARTMENT OF STATE Division of Corporations All Aller Strates

March 14, 2017

MICHAEL WEBER UNIVERSAL FOREST PRODUCTS, INC 2801 É BELTLINE AVENUE NE GRAND RAPIDS, MI 49525

SUBJECT: UFP ORLANDO, LLC Ref. Number: W17000021760

We have received your document for UFP ORLANDO, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

An individual must sign on behalf of the business entity you have designated as the registered agent.

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.

Shelia H Young Regulatory Specialist II 7 HAR 13 PH 1: 38

COVER LETTER

TO:		ation Section of Corporation	s				
SUBJE		P Orlando, L.I.C					
			Name of L	imited Liability C	Company		
The enc Existence	closed "A ce, and ch	pplication by Foreneck are submitted	eign Limited Liability Compa I to register the above refere	any for Authorizat need foreign limit	tion to Trai ed liability	nsact Business in Florida," company to transact busin	Certificate of ess in Florida.
Please r	etum all	correspondence co	oncerning this matter to the f	ollowing:			
		Michael Weber					
			Na	me of Person			
	Universal Forest Products, Inc.						
Firm/Company							است. چرپ-
	2801 E Beltline Ave NE						17 MAR 13 PM W 38
Address							55 -
	Grand Rapids, MI 49525						ယ ကျွ
			City/St	ate and Zip Code			<u>.</u>
		mweber@ufpi.co					် <u>သ</u> လ
	-		E-mail address: (to be used	for future annual	report noti	ification)	
For furt	her infor	nation concerning	this matter, please call:				
	Michae	l Weber		616 at (361-718	81	
		Name of	Contact Person	Area Code	Day	time 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					
Enclose		eck for the followi .00 Filing Fee	ng amount: \$\Boxed\$\$ \$130.00 Filing Fee & Certificate of Status	□ \$155.00 Filin Certified Copy	g Fee &	☐ \$160.00 Filing Fee, Co of Status & Certified Cop	

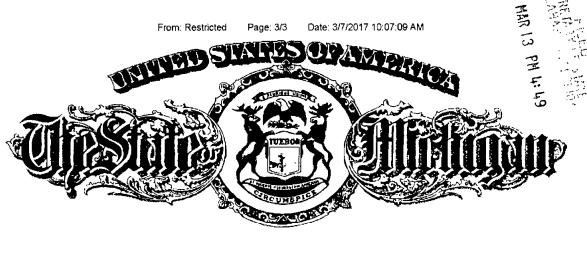
APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION (05:0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN HAMITED HABILITY COMPANY TO TRANSACT BUSINESS IN THE SUATE OF FLORIDA:

, UFP Orlando, LLC					
(Name of Fore	ign Limited Liability Company; mu	st inclu	ide "Limited Liab	ility Company," "L.L.C.," or "LLC	2.")
Liability Company," "L.L.C,"	ternate name adopted for the purpos " or "LLC.")	e of tra	nnsacting business	s in Florida. The alternate name mu	ıst include "Limited
2. Michigan		3.	61-1800521	<u> </u>	
(Jurisdiction under the law company is organized) 4/1/2017	of which foreign limited liability			(FEI number, if applicable)	
4	(Date first transacted busine (See sections 605.0904 & 605	ess in I .0905,	lorida, if prior to F.S. to determine	registration.) penalty liability)	
5. 2801 E. Beltline Ave N	VI E				5 to
Grand Rapids, MI 495					17 HAR 13 PH 4: 49
	(Street Address of	Princip	nal Office)		5 57
6. 2801 E. Beltline Ave N					运 (2)
Grand Rapids, MI 495	25				
	(Mailing	Addre	ss)		
7. Name and street address	ss of Florida registered agent: (P	.O. i3	ox <u>NOT</u> accept	able)	. 19
Name:	C T Corporation System			-	
Office Address:	1200 South Pine Island Road			_	
	Plantation			_ , Florida	
	(City)			(Zip code)	
designated in this applica to complywith the provisi accept the obligations of	gistered agent and to accept ser tion, I hereby accept the appoin ons of all statutes relative to the my position as registered agent. C.T. Corporation S	tment prope	as registered a er and complete	gent and agree to act in this ca	pacity. I further agree
•	acity and address of the person(s			ity to manage is/are:	
Jonathan West, President,	, 5200 Highway 138 Union City,	GA 3			
David A. Tutas, Secretary	, 2801 E. Beltline Ave NE Gran	d Rap	ids, MI 49525		
Michael R. Cole, Treasur	er, 2801 E. Beltline Ave NE Gra	nd Ra	pids, MI 49525		
9. Attached is a certificate jurisdiction under the law of the translator must be s	& Whit	ertific	d, duly authenticate is in a foreign	gn language, a translation of the	ody of records in the certificate under oath
	_				
This document is executed submitted in a document to	I in accordance with section 605, to the Department of State constit	.0203 utes a	(1) (b), Florida third degree fel	Statutes. I am aware that any fal ony as provided for in s.817.15:	se information 5, F.S.

Typed or printed name of signee

TL057 - 9/10/2015 Wolters Kluwer Online



Department of Licensing and Regulatory Affairs

Lansing, Michigan

This is to Certify That

UFP ORLANDO, LLC

was validly organized on August 22, 2016 as a Limited Liability Company. Said Limited Liability Company is validly in existence under the laws of this state and has satisfied its annual filing obligations.

This certificate is issued pursuant to the provisions of 1993 PA 23, as amended, to attest to the fact that the company is in good standing in Michigan as of this date.

This certificate is in due form, made by me as the proper officer, and is entitled to have full faith and credit given it in every court and office within the United States.



Sent by Facsimile Transmission 1437654 In testimony whereof, I have hereunto set my hand, in the City of Lansing, this 7th day of March, 2017

Julia Dale, Director

Corporations, Securities & Commercial Licensing Bureau