

MI7000006878

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

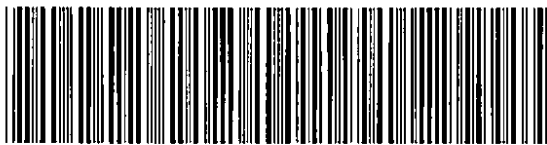
(Document Number)

Certified Copies _____

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OF MISSISSIPPI

17
2017 AUG 10 PM 4:15

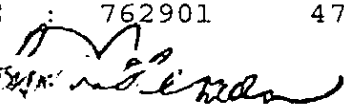
S. WARREN

AUG 11 2017

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 762901 4726940

AUTHORIZATION 

COST LIMIT : \$ 125.00

ORDER DATE : August 10, 2017

ORDER TIME : 3:42 PM

ORDER NO. : 762901-005

CUSTOMER NO: 4726940

FOREIGN FILINGS

NAME: ~~SOUTHEASTERN~~ ALUMINUM PRODUCTS,
LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_____ CERTIFIED COPY
XX _____ PLAIN STAMPED COPY
_____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Melissa Zender -- EXT# 62956

EXAMINER: _____

SOUTHEASTERN ALUMINUM PRODUCTS, INC.
4925 Bulls Bay Highway
Jacksonville, FL 32219

August 9, 2017

Florida Department of State
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

RE: Consent to Qualification of Southeastern Aluminum Products, LLC

To Whom It May Concern:

On behalf of Southeastern Aluminum Products, Inc., a Florida corporation having incorporated effective as of August 27, 1985, and assigned document number H73707 (the "Corporation"), I hereby grant consent on behalf of the Corporation to the qualification of Southeastern Aluminum Products, LLC, an Indiana limited liability company, in Florida.

Thank you for your assistance.

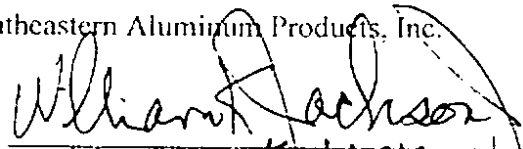
Sincerely,

Southeastern Aluminum Products, Inc.

By:

Name:

Title:


WILLIAM K. JACKSON JR
CHIEF EXECUTIVE OFFICER

FILED
17 AUG 10 AM 10:34
TALLAHASSEE, FLORIDA

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. Southeastern Aluminum Products, LLC

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

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

2. Indiana

(Jurisdiction under the law of which foreign limited liability company is organized)

3. 82-2399413

(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. 11250 N. Gray Rd

(Street Address of Principal Office)

Carmel, IN 46033

6. 11250 N. Gray Rd

(Mailing Address)

Carmel, IN 46033

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

Name: Corporation Service Company

Office Address: 1201 Hays Street

Tallahassee, Florida 32301

(City)

(Zip code)

Registered agent's acceptance:

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 application, I hereby accept the appointment as registered agent and agree to act in this capacity. 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.

Melissa Zender
Asst. Vice President

(Registered agent's signature)

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

Title or Capacity:

Name and Address:

Title or Capacity:

Name and Address:

Manager

SEA Holdings, LLC

11250 N. Gray Rd

Carmel, IN 46033

(Use attachments if necessary)

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)

10. 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.

Julie Schipp
Signature of an authorized person

Julie Schipp, VP of SEA Holdings, LLC, sole manager

Typed or printed name of signee

State of Indiana
Office of the Secretary of State

CERTIFICATE OF EXISTENCE

To Whom These Presents Come, Greeting:

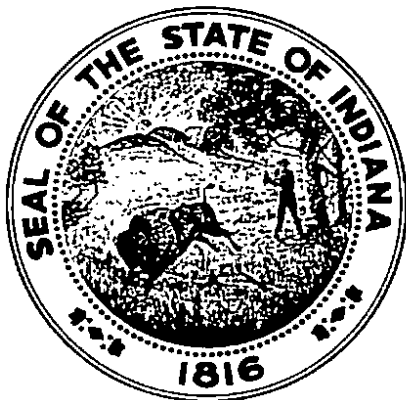
I, CONNIE LAWSON, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana, the custodian of the corporate records and the proper official to execute this certificate.

I further certify that records of this office disclose that

SOUTHEASTERN ALUMINUM PRODUCTS, LLC

duly filed the requisite documents to commence business activities under the laws of the State of Indiana on July 25, 2017, and was in existence or authorized to transact business in the State of Indiana on August 07, 2017.

I further certify this Domestic Limited Liability Company has filed its most recent report required by Indiana law with the Secretary of State, or is not yet required to file such report, and that no notice of withdrawal, dissolution, or expiration has been filed or taken place.



In Witness Whereof, I have caused to be affixed my signature and the seal of the State of Indiana, at the City of Indianapolis, August 07, 2017

Connie Lawson

CONNIE LAWSON
SECRETARY OF STATE

201707251206227 / 2017374523

Verify this certificate: <https://bsd.sos.in.gov/ValidateCertificate>