

M17000008542

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

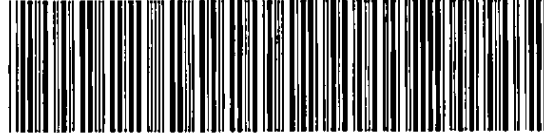
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Office Use Only



200304094192

2017 OCT -2 AM 8:55

FILED

17 OCT -2 PM 2:00

OCT 16 2017
J. HARRIS

~~CHIEF CLERK~~

Please file first

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

ACCOUNT NO. : I20000000195

REFERENCE : 841701 4814293

AUTHORIZATION : *[Signature]*

COST LIMIT : \$ 125.00

ORDER DATE : September 29, 2017

ORDER TIME : 12:39 PM

ORDER NO. : 841701-005

CUSTOMER NO: 4814293

FOREIGN FILINGS

NAME: CLOSETMAID 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: _____



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 3, 2017

CSC
MELISSA ZENDER

SUBJECT: CLOSETMAID LLC
Ref. Number: W17000078242

RESUBMIT

Please give original
submission date as file date.

2017 OCT -2 AM 8:55

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

The registered agent must sign accepting the designation.

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.

Jenna D Harris
Regulatory Specialist II

Letter Number: 217A00019882

2017 OCT -5 AM 10:51

ClosetMaid Corporation
650 S.W. 27th Avenue
Ocala, FL 34471

October 2, 2017

Florida Division of Corporation
2661 Executive Center Cir W.
Tallahassee, FL 32301

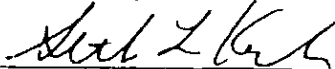
Re: ClosetMaid LLC

Dear Sir/Madam:

ClosetMaid Corporation, a Corporation, organized pursuant to the laws of the State of Florida, hereby consents to the use of the name "ClosetMaid LLC" in the State of Florida.

Sincerely yours,

ClosetMaid Corporation

By: 

Name: Seth L. Kaplan

Title: Assistant Secretary

2017 OCT -2 AM 8:55
FBI
TALLAHASSEE, FL

**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. ClosetMaid 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. The alternate name must include "Limited Liability Company," "L.L.C.," or "LLC.")

2. Delaware 3. _____
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

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

5. <u>c/o Griffon Corporation</u> (Street Address of Principal Office) <u>712 Fifth Avenue, 18th Floor</u> <u>New York, NY 10019</u>	6. <u>c/o Griffon Corporation</u> (Mailing Address) <u>712 Fifth Avenue, 18th Floor</u> <u>New York, NY 10019</u>
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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. 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.

By: Corporation Service Company
(Registered agent's signature)

Melissa Zender
Asst. Vice President

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

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
<u>President</u>	<u>Robert F. Mehmehl</u> <u>712 Fifth Avenue, 18th Floor</u> <u>New York, NY 10019</u>	<u>Vice President</u>	<u>Brian G. Harris</u> <u>712 Fifth Avenue, 18th Floor</u> <u>New York, NY 10019</u>
<u>Vice President</u>	<u>Seth L. Kaplan</u> <u>712 Fifth Avenue, 18th Floor</u> <u>New York, NY 10019</u>		

(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.

Seth L. Kaplan
Signature of an authorized person

Seth L. Kaplan
Typed or printed name of signer

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CLOSETMAID LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWELFTH DAY OF SEPTEMBER, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CLOSETMAID LLC" WAS FORMED ON THE TWENTY-EIGHTH DAY OF AUGUST, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.



A handwritten signature in black ink, appearing to read "JBullock", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed.

6525235 8300

SR# 20176124574

You may verify this certificate online at corp.delaware.gov/authver.shtml

Authentication: 203208855

Date: 09-12-17