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| (Requestor's Name) | | | | | | |
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| (City/State/Zip/Phone #) | | | | | | |
| PICK-UP WAIT MAIL | | | | | | |
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| (Business Entity Name) | | | | | | |
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| (Document Number) | | | | | | |
| Certified Copies Certificates of Status | | | | | | |
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| Special Instructions to Filing Officer: | | | | | | |
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Office Use Only



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Registration Section

TO:

| Div | ision of Corporation | ns , | | | | | |
|-------------------|--|--|------------------------------------|--|--|--------|--|
| | Sutherlands Exterio | rs LLC | | | | | |
| SUBJECT: | | Name of | Limited Liability (| Company | - | | |
| | | | | | ansact Business in Florida." Co y company to transact business | | |
| Please return | ı all correspondence | concerning this matter to the | e following: | | | | |
| | Andrew Suther | land | | | | | |
| | | <u> </u> | lame of Person | | | | |
| | Sutherlands Ex | teriors LLC | | | | | |
| | Firm/Company | | | | | | |
| | 125 Redbud Ln | | | | | | |
| | Address | | | | | | |
| | Troutman NC 28166 | | | | | | |
| | | City/S | State and Zip Code | | <u>. </u> | | |
| | sutherlandsexteri | ors@gmail.com | | | | | |
| | - | E-mail address: (to be use | ed for future annual | report no | tification) | | |
| For further is | nformation concerning | g this matter, please call: | | | | | |
| An | drew Sutherland | | 614 | 507-25 | 42 | | |
| | Name (| of Contact Person | at (Area Code | _) Day | time Telephone Number | | |
| Div Reg P.O | AILING ADDRESS: rision of Corporations gistration Section D. Box 6327 lahassee, FL 32314 | | | Division Registrat Clifton B 2661 Exe | of Corporations ion Section suilding ecutive Center Circle see, FL 32301 | | |
| | a check for the follow \$125.00 Filing Fee | ring amount: ☐ \$130.00 Filing Fee & Certificate of Status | ☐ \$155.00 Filir Certified Copy | ng Fee & | ■ \$160.00 Filing Fee, Certi of Status & Certified Copy | ficate | |



September 19, 2017

ANDREW SUTHERLAND 125 REDBUD LN TROUTMAN, NC 28166 US

SUBJECT: SUTHERLANDS EXTERIORS LLC

Ref. Number: W17000074920

We have received your document for SUTHERLANDS EXTERIORS 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):

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.

Letter Number: 417A00019033

Yasemin Y Sulker Regulatory Specialist II

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. Sutherlands Exteriors I | LLC Limited Liability Company; must include "Limi | 7.41:1.10.00.00.00.00.00.00.00.00.00.00.00.00 | | | |
|--|--|---|---|--|--|
| Sutherlands Construction | | ned Liability Company, L.L.C., or LLC | .) | | |
| | name adopted for the purpose of transacting business in E | Florida. The alternate name must include "Limited I | Liability Company," "L.L.C," or "LLC,") | | |
| 2. Ohio | | 3. 30-0418867 | | | |
| (Jurisdiction under the law of w | hich foreign limited liability company is organized) | (FEI n. | imber, il applicable) | | |
| 4. TBD hopefully 10/15/ | | | | | |
| | (Date first transacted business in Florida, if prior i (See sections 605,0904 & 605,0905, F.S. to deter | to registration.) mine penalty liability) | | | |
| 5. 125 Redbud Ln | | 6. PO Box 1317 | | | |
| (Street Address of I Troutman NC 28166 | Principal Office) | (Mailing Address) Troutman NC 28166 | | | |
| | | riodenati ing 20100 | | | |
| | | | | | |
| 7. Name and street addres | ss of Florida registered agent: (P.O. Bo | ox NOT acceptable) | | | |
| | Registered Agents Inc | · [· · · · · · · | | | |
| Name: | | | | | |
| Office Address: | 3030 N. Rocky Point Dr. | · | | | |
| | Tampa | . Florida 33607 | | | |
| Registered agent's accep | (Cny) | tZip c | ode) | | |
| to comply with the provisi | tion, I hereby accept the appointment ions of all statutes relative to the prope s of my position as registered agent. Bill Havre | er and complete performance of m | | | |
| 8. The name, title or capa | city and address of the person(s) who h | nas/have authority to manage is/are: | <u>ب</u> | | |
| Title or Capacity: | Name and Address: | Title or Capacity: | Name and Address? | | |
| Member | Andrew Sutherland | General Manager | Ariel Ramos | | |
| | 125 Redbud LN Troutman NC 28166 | | Charlotte NC | | |
| | 7700071117170 20100 | _ | | | |
| | | | | | |
| Operations Manager | Timothy Sethna | | | | |
| Operations Manager | Timothy Sethna Kannapolis NC | | | | |
| | Kannapolis NC | | | | |
| (Use attachments if necess 9. Attached is a certificate | Kannapolis NC sary) of existence, no more than 90 days old, of which it is organized. (If the certifical | duly authenticated by the official hate is in a foreign language, a transla | naving custody of records in the | | |
| (Use attachments if necess 9. Attached is a certificate jurisdiction under the law of the translator must be su 10. This document is exect | Kannapolis NC sary) of existence, no more than 90 days old, of which it is organized. (If the certifical | ite is in a foreign language, a transla 93 (1) (b), Florida Statutes, I am awa | ition of the certificate under oath | | |

Typed or printed name of signee

Andrew Sutherland

UNITED STATES OF AMERICA STATE OF OHIO OFFICE OF THE SECRETARY OF STATE

I, Jon Husted, do hereby certify that I am the duly elected, qualified and present acting Secretary of State for the State of Ohio, and as such have custody of the records of Ohio and Foreign business entities; that said records show SUTHERLANDS EXTERIORS LLC, an Ohio Limited Liability Company, Registration Number 1697104, was organized within the State of Ohio on April 30, 2007, is currently in FULL FORCE AND EFFECT upon the records of this office.



Witness my hand and the seal of the Secretary of State at Columbus, Ohio this 15th day of September, A.D. 2017.

Ohio Secretary of State

Jon Hastel

Validation Number: 201725801228