118000001391

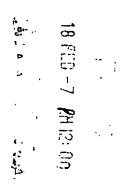
(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MA	.IL			
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

Office Use Only



100308573521

02/07/18--01028--020 **125.00



O SIMMONS

, , , ,

COVER LETTER

TO:		on Section of Corporation	ıs				
SUBJE	Build	ers FirstSource	e - Atlantic Group, LLC				
		_	Name of	Limited Liability	Company		
The enc Existence	losed "App ce, and chec	lication by Forek are submitted	eign Limited Liability Com d to register the above refer	pany for Authoriz enced foreign limi	ation to Tra ited liability	ansact Business in Florida," C y company to transact busines	Certificate of ss in Florida.
Please re	eturn all co	rrespondence c	oncerning this matter to the	following:			
	ì	Kelly Allen - Lo	egal Dept				
	_		N	ame of Person			
	ŀ	Builders FirstSc	ource				
Firm/Company							
	2	001 Bryan Stre	eet Ste 1600				
Address							
	Dallas, TX 75201						
	City/State and Zip Code						
	kel	ly.allen@bldr.	com				
			E-mail address: (to be used	for future annual	report not	ification)	
For furth	ner informa	ion concerning	this matter, please call:				
	Kelly Alle	n		214 at (231-631	75	
		Name of	Contact Person	Area Code	Day	time Telephone Number	
	Division of Registratio P.O. Box 6				Division of Registrati Clifton Bi 2661 Exec	ADDRESS: of Corporations on Section milding cutive Center Circle ee, FL 32301	
		for the following Filing Fee	ng amount: S130.00 Filing Fee & Certificate of Status	☐ \$155.00 Filir Certified Copy	ng Fee &	☐ \$160.00 Filing Fee, Certi of Status & Certified Copy	ficate

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:

If name are allows and a street		 =		
Delaware	name adopted for the purpose of transacting business in Flo		f Liability Company," "L.L.C," or "LLC.")	
	which foreign lumited liability company is organized)	3. <u>52-2080519</u>	number, if applicable)	
	, , <u> </u>	,,,,,,	······································	
4	(Date first transacted business in Florida, if prior to	revistration \		
	(See sections 605.0904 & 605.0905, F.S. to determ	ine penalty liability)		
5 2001 Bryan Street (Street Address of	Program (Office)	6. 2001 Bryan Street		
Ste 1600		(Mailing Address) Stc 1600		
Dallas, TX 75201		Dallas, TX 75201		
		1741143, 174 75201	\	
7. Name and street addre	ss of Florida registered agent: (P.O. Box	NOT acceptable)	· \ \ \frac{1}{2}	
	CT Corporation System	<u></u>	>,	
Name:	er corporation system			
Office Address:	1200 South Pine Island Road		a: 2	
	Plantation	33324		
	(City)	, Florida 33324	code)	
o comply with the provisind accept the obligation	ions of all statutes relative to the proper is of my position as registered agent.	and complete performance of n CT Corporation System Howard L. Vol.	ny duties, and I am familiar with	
ind accept the obligation 8. The name, title or cap.	ions of all statutes relative to the proper	and complete performance of n CT Corporation System Howard L. Volz, Assistan	ny duties, and I am familiar with	
ind accept the obligation	ions of all statutes relative to the proper is of my position as registered agent. (Registered agent's	and complete performance of n CT Corporation System Howard L. Volz, Assistan	nt Secretary	
ind accept the obligation 8. The name, title or cap.	ions of all statutes relative to the proper is of my position as registered agent. (Registered agent's acity and address of the person(s) who hat Name and Address: Floyd Sherman	and complete performance of n CT Corporation System Howard L. Volz, Assistants/have authority to manage is/are	ny duties, and I am familiar with nt Secretary	
8. The name, title or cap. Title or Capacity:	ions of all statutes relative to the proper is of my position as registered agent. (Registered agent's acity and address of the person(s) who have and Address:	and complete performance of n CT Corporation System Howard L. Volz, Assistants/have authority to manage is/are Title or Capacity:	ny duties, and I am familiar with nt Secretary : Name and Address: Donald F McAleenan	
8. The name, title or cap. Title or Capacity:	(Registered agent's acity and address of the person(s) who have a many and address of the person(s) who have a many and address: Floyd Sherman 2001 Bryan Street Ste 1600	and complete performance of n CT Corporation System Howard L. Volz, Assistants/have authority to manage is/are Title or Capacity: Manager	ny duties, and I am familiar with nt Secretary Name and Address: Donald F McAleenan 2001 Bryan Street Ste 1600 Dallas, TX 75201	
S. The name, title or cap. Title or Capacity: Manager	(Registered agent's acity and address of the person(s) who has Name and Address: Floyd Sherman 2001 Bryan Street Ste 1600 Dallas, TX 75201 Chad Crow 2001 Bryan Street Ste 1600	and complete performance of n CT Corporation System Howard L. Volz, Assistants/have authority to manage is/are Title or Capacity:	nt Secretary Signature and Address: Name and Address: Donald F McAlcenan 2001 Bryan Street Ste 1600 Dallas, TX 75201 Morris Tolly 2001 Bryan Street Ste 1600	
8. The name, title or cap. Title or Capacity: Manager Manager	ions of all statutes relative to the proper is of my position as registered agent. (Registered agent's acity and address of the person(s) who has Name and Address: Floyd Sherman 2001 Bryan Street Ste 1600 Dallas, TX 75201 Chad Crow 2001 Bryan Street Ste 1600 Dallas, TX 75201	and complete performance of n CT Corporation System Howard L. Volz, Assistants/have authority to manage is/are Title or Capacity: Manager	ny duties, and I am familiar with nt Secretary Name and Address: Donald F McAleenan 2001 Bryan Street Ste 1600 Dallas, TX 75201 Morris Tolly	
3. The name, title or cap. Title or Capacity: Manager Manager	ions of all statutes relative to the proper is of my position as registered agent. (Registered agent's acity and address of the person(s) who has Name and Address: Floyd Sherman 2001 Bryan Street Ste 1600 Dallas, TX 75201 Chad Crow 2001 Bryan Street Ste 1600 Dallas, TX 75201	and complete performance of n CT Corporation System Howard L. Volz, Assistants/have authority to manage is/are Title or Capacity: Manager	nt Secretary The Mame and Address: Donald F McAlcenan 2001 Bryan Street Ste 1600 Dallas, TX 75201 Morris Tolly 2001 Bryan Street Ste 1600	
8. The name, title or cap. Title or Capacity: Manager Manager Use attachments if neces	(Registered agent's acity and address of the person(s) who has Name and Address: Floyd Sherman 2001 Bryan Street Ste 1600 Dallas, TX 75201 Chad Crow 2001 Bryan Street Ste 1600 Dallas, TX 75201 sary) of existence, no more than 90 days old, of which it is organized. (If the certificate	and complete performance of near CT Corporation System Howard L. Volz, Assistants/have authority to manage is/are Title or Capacity: Manager Manager	nt Secretary Name and Address: Donald F McAleenan 2001 Bryan Street Ste 1600 Dallas, TX 75201 Morris Tolly 2001 Bryan Street Ste 1600 Dallas, TX 75201	
8. The name, title or cap. Title or Capacity: Manager Manager Use attachments if neces arisdiction under the law of the translator must be sign. This document is executed.	(Registered agent's acity and address of the person(s) who has Name and Address: Floyd Sherman 2001 Bryan Street Ste 1600 Dallas, TX 75201 Chad Crow 2001 Bryan Street Ste 1600 Dallas, TX 75201 sary) of existence, no more than 90 days old, of which it is organized. (If the certificate	and complete performance of notice of the CT Corporation System Howard L. Volz, Assistants/have authority to manage is/are Title or Capacity: Manager Manager duly authenticated by the official eris in a foreign language, a trans	nt Secretary Signature and Address: Name and Address: Donald F McAleenan 2001 Bryan Street Ste 1600 Dallas, TX 75201 Morris Tolly 2001 Bryan Street Ste 1600 Dallas, TX 75201 having custody of records in the lation of the certificate under out	
8. The name, title or cap. Title or Capacity: Manager Manager Use attachments if neces arisdiction under the law of the translator must be sign. This document is executed.	(Registered agent's acity and address of the person(s) who has Name and Address: Floyd Sherman 2001 Bryan Street Ste 1600 Dallas, TX 75201 Chad Crow 2001 Bryan Street Ste 1600 Dallas, TX 75201 sary) of existence, no more than 90 days old, of which it is organized. (If the certificate abmitted) uted in accordance with section 605.0203 of the Department of State constitutes a thing.	and complete performance of notice of the CT Corporation System Howard L. Volz, Assistants/have authority to manage is/are Title or Capacity: Manager Manager duly authenticated by the official eris in a foreign language, a trans	nt Secretary Signature and Address: Name and Address: Donald F McAleenan 2001 Bryan Street Ste 160 Dallas, TX 75201 Morris Tolly 2001 Bryan Street Ste 160 Dallas, TX 75201 having custody of records in the lation of the certificate under oat ware that any false information	
8. The name, title or cap. Title or Capacity: Manager Manager Use attachments if neces arisdiction under the law of the translator must be sign. This document is executed.	(Registered agent's acity and address of the person(s) who has Name and Address: Floyd Sherman 2001 Bryan Street Ste 1600 Dallas, TX 75201 Chad Crow 2001 Bryan Street Ste 1600 Dallas, TX 75201 sary) of existence, no more than 90 days old, of which it is organized. (If the certificate abmitted) uted in accordance with section 605.0203 of the Department of State constitutes a thing.	and complete performance of national CT Corporation System Howard L. Volz, Assistant as/have authority to manage is/are Title or Capacity: Manager Manager Manager (1) 60, Florida Statutes, I am avord degree felony as provided for	nt Secretary Name and Address: Donald F McAleenan 2001 Bryan Street Ste 160 Dallas, TX 75201 Morris Tolly 2001 Bryan Street Ste 160 Dallas, TX 75201 having custody of records in the lation of the certificate under oal ware that any false information	

	y and address of the person(s) who has		re:
Title or Capacity:	Name and Address:	Title or Capacity:	Name and Address:
Manager	Peter Jackson	Vice President	Jeffrey A. Wier
	2001 Bryan Street Ste 1600 Dallas, TX 75201		2001 Bryan Street Ste 1600 Dallas, TX 75201
Vice President	Deryl Ward		
	2001 Bryan Street Ste 1600 Dallas, TX 75201		





I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "BUILDERS FIRSTSOURCE - ATLANTIC GROUP,

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 SIXTEENTH DAY OF JANUARY, A.D. 2018.

Authentication: 201978445

Date: 01-16-18