

118000002400

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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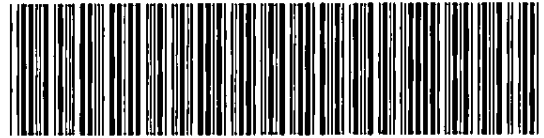
(Business Entity Name)

(Document Number)

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2018 MAR -9 A 10:54
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
2018 MAR -9 PM 1:31
TALLAHASSEE, FLORIDA

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

ACCOUNT NO. : I20000000195
REFERENCE : 109601 8108024
AUTHORIZATION : *[Signature]*
COST LIMIT : \$ 125.00

ORDER DATE : March 9, 2018
ORDER TIME : 9:53 AM
ORDER NO. : 109601-005
CUSTOMER NO: 8108024

FOREIGN FILINGS

NAME: HS FOAM FABRICATORS 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: Emily Croft -- EXT# 62925

EXAMINER: _____

FILED
2018 MAR -9 A 10:54
TALLAHASSEE, FL 32301
SECRETARY OF STATE

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. HS Foam Fabricators, 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. North Carolina 3. 82-3715139
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. January 1, 2018
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 235 2nd Avenue, N.W. 6. 235 2nd Avenue, N.W.
(Street Address of Principal Office) (Mailing Address)
Hickory, NC 28601 Hickory, NC 28601

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.

Corporation Service Company
By: _____

(Registered agent's signature)

Emily Croft

Emily Croft
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>Chairman</u>	<u>Mark S. Jones</u> <u>235 2nd Avenue, N.W.</u> <u>Hickory, NC 28601</u>	<u>CFO</u>	<u>Valerie W. Reid</u> <u>235 2nd Avenue, N.W.</u> <u>Hickory, NC 28601</u>
<u>Secretary</u>	<u>Bobby W. Bush, Jr.</u> <u>235 2nd Avenue, N.W.</u> <u>Hickory, NC 28601</u>	<u>COO</u>	<u>Michael W. Hinchaw, Jr.</u> <u>235 2nd Avenue, N.W.</u> <u>Hickory, NC 28601</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.

Bobby W. Bush, Jr.

(Signature of an authorized person)

Bobby W. Bush, Jr., Secretary

Typed or printed name of signer



NORTH CAROLINA

Department of the Secretary of State

CERTIFICATE OF EXISTENCE (Limited Liability Company)

I, Elaine F. Marshall, Secretary of State of the State of North Carolina, do hereby certify that

HS FOAM FABRICATORS, LLC

is a limited liability company duly formed under the laws of the State of North Carolina, having been formed on the 14th day of November, 2017, with its period of duration being Perpetual.

I FURTHER certify that the said limited liability company's articles of organization are not suspended for failure to comply with the Revenue Act of the State of North Carolina; that the said limited liability company is not administratively dissolved for failure to comply with the provisions of the North Carolina Limited Liability Company Act; and that the said limited liability company has not filed articles of dissolution as of this date of this certificate.



Scan to verify online.

IN WITNESS WHEREOF, I have hereunto set
my hand and affixed my official seal at the City
of Raleigh, this 9th day of March, 2018.

Elaine F. Marshall

Secretary of State