## Florida Department of State

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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LICENSES ETC INC Account Number : 120070000159 Phone : (239)777-1028

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## Foreign Limited Liability Company FAIRWAY BUILDING PRODUCTS, LLC

| Certificate of Status | S 1      |  |  |
|-----------------------|----------|--|--|
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Electronic Filing Menu

Corporate Filing Menu

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#### COVER LETTER

| UBJECT:                     | FAIRWAY BUILDING PRODUCTS, LLC   |   |  |  |                                   |
|-----------------------------|--|---|--|--|-----------------------------------|
| Onanc i.                    | Name o   | of Limited Liability (                      | Company  |  |                                   |
| he enclosed<br>xistence, ar | l "Application by Foreign Limited Liability Co<br>ad check are submitted to register the above ref | mpmy for Authoriza<br>erenced foreign fimit | tion to Transact E<br>red liability compa  | Business in Florida,"<br>any to transaet busin | Certificate of<br>ness in Florida |
| lease return                | all correspondence concerning this matter to t   | he following:                               |  |  |                                   |
|                             | LISA ADAMS   |   |  |  |                                   |
|                             |  | Name of Person                              |  |  |                                   |
|                             | LICENSES, ETC., INC.   |   |  |  |                                   |
|                             |  | Firm/Company                                |  |  |                                   |
|                             | 886 110TH AVE. N., SUITE 6   |   |  |  |                                   |
|                             |  | Address                                     |  |  |                                   |
|                             | NAPLES, FL 34108   |   |  |  |                                   |
|                             | City   | /State and Zip Code                         |  |  | •                                 |
|                             | SUPPORT@LICENSESETC.COM  |   |  |  |                                   |
|                             | E-mail address: (to be t   | ised for future annua                       | report notification  | n)   |                                   |
| or further i                | nformation concerning this matter, please call:  |   |  |  |                                   |
| 1,15                        | SA ADAMS   | 239<br>at (                                 | 777-1028   |  |                                   |
|                             | Name of Contact Person   | Area Code                                   | Daytime T  | elephone Number                                | •                                 |
| Div<br>Reg<br>P.C           | AILING ADDRESS: vision of Corporations gistration Section ). Box 6327 lahassee, FL 32314           |   | Division of Con<br>Registration Sec<br>Clifton Building<br>2661 Executive<br>Tallahassee, FL | porations<br>etion<br>B<br>Center Circle       |                                   |
| inclosed is                 | a check for the following amount:  |   |  |  | Fee, Certifier                    |

## APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPIJANCE WITH SECTION 605,0002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREKIN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS. IN THE STATE OF FLORIDA:

| l'onne convolable, corer alteronte o   | ance adopted for the purpose of transactivy business in Flor  | ida The al | ternate name most melade "I imited I cability Co | праву," "1.1.С," | <del>о. "ПС</del> С" | 1 |  |
|--|---|------------|--|------------------|----------------------|---|--|
| PENNSYLVANIA   |   | 3          | 47-1232580<br>3.                                 |                  |                      |   |  |
| (digredience) ander the law of which (oreign horized liability company is organized) |   |            | (ITI number, iI 49                               | nivable)         |                      |   |  |
| ·  | (Date first transacted business in Florida, if prior to   | CRISISSIEN |  |                  |                      |   |  |
| 53 EBYS CHIQUES F  | (Date fins transacted business in Flenda, if prior to (See sections 605 0904 & 605 0905, U.S. to determ |            | 53 EBYS CHIQUES ROAD                             |                  |                      |   |  |
|  | Principal Office)   | 6.         | (Mailing Address)                                |                  |                      |   |  |
| MOUNT JOY, PA 17552  |   |            | MOUNT JOY, PA 17552                              |                  |                      |   |  |
|  | ***************************************   |            |  | SLO              | <b>3</b>             |   |  |
| . Name and street addres   | ss of Florida registered agent: (P.O. Box   | NOT :      | icceptable)                                      |                  | )EC 21               | ī |  |
| Name:  | COGENCY GLOBAL, INC.  |            |  | OF SIA           | F 19                 |   |  |
| Office Address:  | 115 N. CALHOUN ST., SUITE 4   |            | <del></del>                                      | ŞA               | ယ<br>()              |   |  |
|  | TALLAHASSEE   |            | 32301<br>, Florida                               |                  |                      |   |  |
|  | (City)  |            | (Zip code)                                       |                  |                      |   |  |

/s/ ERIC HOOD, ASSISTANT SECRETARY

(Registered agent's signature)

| Title or Capacity: | id address of the person(s) who has/have authority to manage<br><u>Name and Address:</u> |                |              |
|--------------------|--|----------------|--------------|
| AMBR               | GREG BURKHOLDER  |                |              |
|                    | 53 EBYS CHIQUES RD.  | <del></del>    |              |
|                    | MOUNT JOY. PA 17552  | <del></del>    |              |
| AMBR               | CHUCK GEORGE   |                |              |
| 10.                | 53 EBYS CHIQUES RD.  |                |              |
|                    | MOUNT JOY, PA 17552  |                |              |
| AMBR               | ROBERT SHANGRAW  |                |              |
|                    | 53 EBYS CHIQUES RD.  | A S            | 1 <b>8</b> D |
|                    | MOUNT JOY, PA 17552  | 25<br>25<br>25 | DEC 21       |
| AMBR               | JOSEPH CARFARO   |                | <b>宝</b> [   |
|                    | 2075 E. STATE ST. EXT.   |                | ယ္           |
|                    | HAMILTON, NI 08619   |                |              |

#### (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.

JOSEPH CARFARO

Typed or printed name of signee

# COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF STATE 12/20/2018

### TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

Fairway Building Products, LLC

is duly registered as a Pennsylvania Limited Liability Company under the laws of the Commonwealth of Pennsylvania and remains subsisting so far as the records of this office show, as of the date herein.

I DO FURTHER CERTIFY THAT this Subsistence Certificate shall not imply that all fees, taxes and penalties owed to the Commonwealth of Pennsylvania are paid.

. 18 DEC 21 AH Sa 39



IN TESTIMONY WHEREOF, I have hereunto set my hand and caused the Seal of the Secretary's Office to be affixed, the day and year above written

Acting Secretary of the Commonwealth

Certification Number: TSC181220090290-1

Verify this certificate online at http://www.corporations.pa.gov/orders/verify