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To:

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

IN COMPLIANCE WITH SECOND 605,0002, FLORIDA STATUTES, THE POLLOWING IS SUBMITTED TO REGISTER A POREIGN HIMITED HABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA-

II fallie the valuate, court 4. termite	name adopted for the purpose of transacting business.	in Florida. The alternate name must	st inticate "Limited Liability	Company," "L.L.C, " or "LLC."	1
Delaware		3. 84-247610	18		
	rhich krogn haded lability company is organized)	<u> </u>	(FH) samper, i	(applicable)	
Upon Qualification					
	(Date first transacted business in Florida, if pr (See sections 605,19704 & 605,0905, F.S., to 4	ior to registration)		2	
23700 Chagrin Blvd.	(See See See See See See See See See See	6. Same		28 3	
(Sirest Address of	Principal (illian)	6. <u>Stine</u>	(Maning Address)	- 50 A -	1
Beachwood, OH 4412	2			<u> </u>	
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		·· .		· [0 · ·	Ti
l. Name and street address	ss of Florida registered agent: (P.O.	Box NOT acceptable)			
•	C T Corporation System			4:4 STAT FLORI	
Name:				골등 =	
Office Address:	1200 South Pine Island Road			D	
	Plantation	Elec	rida <u>33324</u>		
	(City)	TIO	(Zip code)	_	
Registered agent's accep	dance:				
laving been named as re	gistered agent and to accept service	of process for the abov	e stated limited lia	bility company at the r	lace
	tion, I hereby accept the appointme.				
o comply wan the provision	ions of all statutes relative to the pro s of my position as registered agent.	iper una compicie perjo			
іна иссері іне овидаціон			//. / Ma	irgaret E. Rout	zah
	By: C.T.Corporation System /	Harabut 21	Wilter Bes	istant Vice Pre	
					5140
	By: C.T Corporation System //	ent's nigraphies)			Siuc
8. The name, title or capa		Ŭ			SIGO
8. The name, title or capa Title or Capacity:	(Registered ag acity and address of the person(s) wh Name and Address:	Ŭ	nanage is/arc;	Vame and Address:	Sicio
	acity and address of the person(s) when Name and Address:	o has/have authority to i	nanage is/arc;		Sicio
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Title or Capacity:	ncity and address of the person(s) when Name and Address: BASF Corporation 100 Park Avenue	o has/have authority to i	nanage is/arc;		5100
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Title or Capacity: MEMBER (Use attachments if neces	BASE Corporation 100 Park Avenue Florham Park, NJ 07932	o has/have authority to i	nanage is/are:	vame and Address:	
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Typed or printed name of signes

Delaware The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "MASTER BUILDERS SOLUTIONS US 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 FIFTH DAY OF FEBRUARY, A.D. 2020.

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

7506704 8300

SR# 20200820017

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

Authentication: 202324277

Date: 02-05-20