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Office Use Only



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S. ROBERTS DEC 1 3 2021

Sunshine State Corporate Compliance Company

3458 Lakeshore Drive, Tallahassee, Florida 32312 ... (850) 656-4724

DATE 12/13/2021	-		**************************************
			*WALK IN
ENTITY NAME Envision	n building products, L	LC	
DOCUMENT NUMBER_			
	PLEASE FILE TH	HE ATTACHED AND RETURN	
XXXXX	Plain Copy		
	Certified Copy		
	Certificate of Status		
	Certified Copy of Arts Certificate of Good Sta		
	APOSTILLE' / N	NOTARIAL CERTIFICATION	
COUNTRY OF DESTINAT	TION		
NUMBER OF CERTIFICA	TES REQUESTED		
TOTAL OWED \$125	····	ACCOUNT #: I20160000	072
		5.8711	
Please call Tina at th	he above number for	any issues or concerns. Thank you	a so much!

Registration Section

TO:

COVER LETTER

	Name o	f Limited Liability	Company	
enclosed "Application by Fore ence, and check are submitted	ign Limited Liability Cor to register the above refe	mpany for Authoriz erenced foreign lim	ation to Transact Business in Florida," (ited liability company to transact busine	Certificat ess in Flo
e return all correspondence co	ncerning this matter to th	e following:		
Harbor Complia	nce			
		Name of Person		
- 		Firm/Company		
1830 Colonial V	illage LN			
		Address		
Lancaster, PA, 1	7601			
	City	State and Zip Code	•	
corporate@harbor	•			
	E-mail address: (to be us	sed for future annua	l report notification)	
urther information concerning	this matter, please call:			
James Connolly		717 at (431-9130	
Name of	Contact Person	Area Code	Daytime Telephone Number	
MAILING ADDRESS: Division of Corporations			STREET ADDRESS: Division of Corporations	
Registration Section P.O. Box 6327			Registration Section Clifton Building	
Tallahassee, FL 32314			2661 Executive Center Circle Tallahassee, FL 32301	
	e following amount:			

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:

3. (FEI number,)	f applicable)	
3. (FEI number, if applicable)		
registration.) ine penalty liability)		
PO Box 37		
(Mailing Address)		
Mount Joy, PA, 17552		
	702	
	A: Grand	
NOT acceptable)	PH	
	• •	
33702 , Florida		
(Zip code)	_	
	PO Box 37 6. (Stailing Address)	

8. For initial index manage [up to six (6	ing purposes, list names, title or capacity and add 5) total]:	lresses of the primary m	nembers/managers or persons authorized to
Title or Capacity:	Name and Address:	Title or Capacity:	Name and Address:
Manager	Name: TAMKO Holdings, Inc.	Manager	Name:
Member	Address: 211 S. Main Street, Suite 300,	☐ Member	Address: 211 S. Main Street, Suite 300,
Authorized	Joplin, MO 64801	Authorized	Joplin, MO 64801
Person		Person	
Other	Other	Other	Other
□Manager	Name:	Manager	Name:
Member	Address:	Member	Address:
Authorized		☐ Authorized	
Person		Person	
Other	Other	Other	Other
☐Manager	Name:	☐ Manager	Name:
Member	Address:	☐ Member	Address:
Authorized		Authorized	
Person		Person	
Other	Other	Other	Other
9. Attached is a cert jurisdiction under the of the translator mu	Use an attachment to report more than six (6). The may be added to the index when filing your Floridificate of existence, no more than 90 days old, due law of which it is organized. (If the certificate is the submitted) is executed in accordance with section 605.0203 (ment to the Department of State constitutes a third poor of the Department of State constitutes a third poor of the Department of State constitutes a third poor of the Department of State constitutes a third poor of the Department of State constitutes a third poor of the Department of State constitutes a third poor of the Department of State constitutes a third poor of the Department of State constitutes a third poor of the Department of State constitutes as the Department of State con	ida Department of State aly authenticated by the is in a foreign language. (1) (b), Florida Statutes. I degree felony as provi-	e Annual Report form. cofficial having custody of records in the control of the certificate under oath Lam aware that any false information
	David C. Humphreys		

Typed or printed name of signee



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

DELAWARE, DO HEREBY CERTIFY "ENVISION BUILDING PRODUCTS 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 TWENTY-NINTH DAY OF NOVEMBER, A.D. 2021.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ENVISION BUILDING PRODUCTS LLC" WAS FORMED ON THE TWENTY-FIRST DAY OF OCTOBER, A.D. 2021.

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

ANS OF STREET OF

Authentication: 204801594

Date: 11-29-21

6324997 8300 SR# 20213909751