# M22000018338

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#### COVER LETTER

TO: I	Registration Section Division of Corporations					
	Hillier Restoration, LLC					
SUBJEC	Name of Limited Liability Company					
The enclo Existence	osed "Application by Foreign Limited Liability C e, and check are submitted to register the above r	Company for Authorizat eferenced foreign limite	ion to Transact Business in Florida." Certificate of d liability company to transact business in Florida			
Please ret	turn all correspondence concerning this matter to	the following:				
	Jamie Guidry					
		Name of Person				
	Hillier Restoration, LLC					
Firm/Company 18850 Hwy 59 N, Suite 100						
	Humble, TX 77338					
City/State and Zip Code						
	jamie.guidry@pauldavis	.com				
	E-mail address: (to be	used for future annual	report notification)			
For furth	er information concerning this matter, please cal	II:				
	Jamie Guidry	281	Daytime Telephone Number			
	Name of Contact Person	Area Code	Daytime Telephone Number			
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303				
	Enclosed is a check for the following amount: Please make check payable to: FLORIDA DEF  \$\Begin{array}{c} \Boxed{1}	e & - 🔲 \$155.00 Fili	FE  ing Fee & \$160.00 Filing Fee, Certificate of Copy  of Status & Certified Copy			

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

IN COMPLIANCE WITH SECTION (05,000), FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE SECTE OF FLORIDA.

me mavailable, enter alternate na	ne adopted for the purpose of transacting business	in Florida. The al	ternate name must include "Erinited Liability Compa	ny,7 "L.I. C," o
٠			81-3410831	
Characterian under the law of which foreign limited liability company is org		(FE) minber, if applicable)		
N/A				
	(Date first transacted business in Florida, if pr (See sections 605,0904 & 605,0905, F.S. to d	or to registration stermine penalty l	) ability)	
18850 Hwy	59 N	,	18850 Hwy 59 N	_
et Address of Principal Office)		0.	(Mailing Address)	
Suite 100		_	Suite 100	
Humble, TX 77338		Humble, TX 77338		
	s of Florida registered agent: (P.O.	Box NOT	occeptable)	2072 DEC
Name and <u>succi addres</u>	g OT F Wilder Ug. 2000 5			0)
Name:	Northwest Registered	d Agent	LLC	
	7901 4th St N STE 300	·		Fii 4: 06
Office Address:	7301 741 001.01.2	<del></del>		
	St. Petersburg		, Florida <u>33702</u>	

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
Having been named as registered agent and to accept service of process for the above stated limited liability company at the place
Having been named as registered agent and agree to act in this capacity. I further agree
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.

Ton Glove		
	(Registered agent's signature)	

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total].

manage Jup to any co	) is the L		
Title or Capacity:	Name and Address:  Bob Hitlier, CEO	Title or Capacity:	Name and Address:  Jamie Guidry, VP HR Name:
- anager	Name: Bob Hitlier, CEO	-	18850 Hwy 59 N
Member	Address: 18850 Hwy 59 N	□Member	
□Authorized	Suite 100	Authorized	Suite 100
Person	Humble, TX 77338	Person	Humble, TX 77338
□Other		Other	Other
□Manager	Name: Robby Organ, CRO	□Manager	Name:
□Member	Address: 18850 Hwy 59 N	□Member	Address:
Nauthorized	Suite 100	□Authorized	
Person	Humble, TX 77338	Person	
Other		Other	Other
□Manager	Name:	□Manager	Name:
□Member	Address:	□Member	Address:
□Authorized		□Authorized	
Person		Person	
Other	Other	Other	Other

<u>Important Notice:</u> Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

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.

Jamie Guidry, VP Human Resources

Typed or printed name of signee

Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



John B. Scott Secretary of State

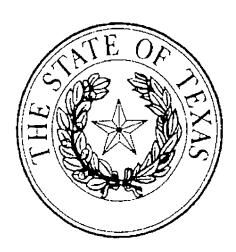
### Office of the Secretary of State

### Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for Hillier Restoration, LLC (file number 802510011), a Domestic Limited Liability Company (LLC), was filed in this office on July 29, 2016.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on October 08, 2022.



John B. Scott Secretary of State