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Account#: I20000000088

Date:	08/29/2023	
Name:	Merritt	
Reference #	<sub>#:</sub> 2101695	
Entity Name	MCCURDY-WA	LDEN ROOFING, LLC
Ame	les of Incorporation/Authorizationdment	n to Transact Business
_	statement version per	
☐ Fictiti	olution/Withdrawal ious Name rCERTIFIED_CO	PY OF THE FILING EVIDENCE
Authorized	Amount: <b>\$155</b>	

F: +852.2682.9790



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Account#: I20000000088

Date:	08/29/2023	
Name:		<del></del>
	2101695	
		WALDEN ROOFING, LLC
✓ Artic	les of Incorporation/Authoriz	ration to Transact Business
☐ Ame	ndment	
☐ Char	nge of Agent	
☐ Rein	statement	
Conv	version	
☐ Merg	ger	
Disse	olution/Withdrawal	
☐ Fictit	ious Name	
✓ Othe	CERTIFIE	COPY OF THE FILING EVIDENCE
Authorized A	Amount: <b>\$155</b>	
Signature:	mw	

F: 800.944.6607

F: +852.2682,9790

## 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 COMPANYTOTRANSACT BUSINESS IN THE STATE OF FLORIDA:

(Name of Foreign	Limited Liability Company; must include "Limited	d Liability	Company," "L.L.C.," or "LLC.")			
name unavailable, enter alternate n	name adopted for the purpose of transacting business in Fl	lorida The	alternate name must include "Limited Liab	ility Company," "LL.C," or "LLC."		
Delaware		3	93-3129722			
(Jurisdiction under the law of which foreign limited liability company is organized)		3.	(FEI number, if applicable)			
Upon Filing						
	(Date first transacted business in Florida, if prior to (See sections 605,0904 & 605,0905, F.S. to determi	registration	.) inbility)	<del></del>		
5267 Commonwealth Avenue		6.	5267 Commonwealth Avenue			
eet Address of Principal Office)	· · · · · · ·	0.	(Mailing Address)			
Jacksonville, FL 3225	4		Jacksonville, FL 32254			
			<del></del>	20 S		
Name and street addres	s of Florida registered agent: (P.O. Box	NOT a	cceptable)	2023 AUG SECKE A		
Name:	Corporation Service Company		<del></del>	29 品格 品格等		
Office Address:	1201 Hays Street		<del></del>	AH IZ: 46 OF STATE SEE: PATE		
	Taliahassee		32301 , Florida			
	(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.

(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

Title or Capacity:	Name and Address:	Title or Capacity:	Name and Address:
□Manager	Name: Dustin DeVore	□Manager	Name:
∃Member	Address: 1385 Union Hill Industrial Ct.	□Member	Address: 1385 Union Hill Industrial C
□Authorized	Alpharetta, GA 30004	□Authorized	Alpharetta, GA 30004
Person		Person	
CEO Cther	Other	<b>■</b> Other CFO	Other
□Manager	Name: Scott Clancy	□Manager	Name:
∃Member	Address: 1385 Union Hill Industrial Ct.	□Member	Address:
□Authorized	Alpharetta, GA 30004	□Authorized	
Person		Person	
Other	□Other	Other	
∃Manager	Name:	□Manager	Name:
]Member	Address:	□Member	Address:
Authorized		□Authorized	
Person		Person	
Other	Other	Other	□Other
	se an attachment to report more than six (6). I may be added to the index when filing your F		
indexed individuals  9. Attached is a cert	may be added to the index when filing your F ificate of existence, no more than 90 days old, e law of which it is organized. (If the certifica	lorida Department of State duly authenticated by the	Annual Report form.  official having custody of records in the

- 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.

✓	Duncan Thomas	
	B59*BAE67:7040F Signature of an authorized person	
	Duncan Thomas	
	Typed or printed name of signee	



Page 1

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

DELAWARE, DO HEREBY CERTIFY "MCCURDY-WALDEN ROOFING, 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-EIGHTH DAY OF AUGUST, A.D. 2023.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "MCCURDY-WALDEN ROOFING, LLC" WAS FORMED ON THE EIGHTEENTH DAY OF AUGUST, A.D. 2023.

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

Authentication: 204047485

Date: 08-28-23