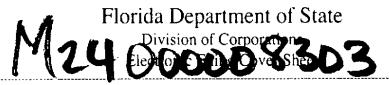
Division of Corporations

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## Foreign Limited Liability Company **Clawfoot Supply, LLC**

Certificate of Status	1
Certified Copy	0
Page Count	06
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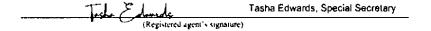
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# APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

1.1 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: Clawfoot Supply, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C." or "LLC.") Kentucky (Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable) Date first transacted business in Florida, if prior to registration ( (See sections 605,0004 & 605,0005, F.S. to determine penalty liability) 751 Lakefront Commons 751 Lakefront Commons 6. (Mailing Address) (Street Address of Principal Office) fered a; Newport News, VA 23606 Newport News, VA 23606  $D = \sqrt{1/V}$ 1 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Corporate Creations Network Inc. Name: 801 US Highway 1 Office Address: North Palm Beach , Florida

#### 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.



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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]:

Title or Capacity:	Name and Address:	Title or Capacity	Name and Address:
G i s No. □Maṇager s	Name: Keith R. Hammond	□Manager	Name: Richard Winckler
☐Member : #	Address: 2700 Crescent Springs Pike	□Member	Address: 751 Lakefront Commons
□Authorized	Erlanger, KY 41017	□Authorized	Newport News, VA 23606
Person <sub>to</sub>		Person	
■Other President	Other	Director Other Senior Vice	President Other
1 720			
□Manager	Name: Krista Jones McAninley	□Manager	Name: Rebecca S. Dubois
□Member	Address: 751 Lakefront Commons	□Member	Address: 751 Lakefront Commons
□Authorized	Newport News, VA 23606	□Authorized	Newport News, VA 23606
Person Ner Person dry		Person	
	Board & Vice President [2] Other	■Other Vice Pres	ident - Tax
io. e □Manager <sub>p r</sub>	Name:	□Manager	Name: Shaun McElhannon
□Member	Address: 751 Lakefront Commons	□Member	Address: 751 Lakefront Commons
□Authorized	Newport News, VA 23606	□Authorized	Newport News, VA 23606
Person		Person	
Other Vice Preside	nt - HR	Other Vice Preside	ent & Treasurer []Other

Important Notice: 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.

Taska Edwards	
Signature of an authorized person	
Tasha Edwards, Attorney-in-Fact	
Typed or printed name of signee	

### Clawfoot Supply, LLC

Krista Jones McAninley

Director

Chairman of the Board & Vice President

Office Address:

751 Lakefront Commons Newport News, VA 23606

Keith R. Hammond

President

Office Address:

2700 Crescent Springs Pike

Erlanger, KY 41017

Richard Winckler

Director

Senior Vice President

Office Address:

751 Lakefront Commons Newport News, VA 23606

Rebecca S. Dubois

Vice President - Tax

, . Office Address:

751 Lakefront Commons Newport News, VA 23606

Polly Foote

Vice President - HR

Office Address:

751 Lakefront Commons Newport News, VA 23606

Shaun McElhannon

Vice President & Treasurer

Office Address:

751 Lakefront Commons Newport News, VA 23606

Brenda L. Crowder

**Assistant Treasurer** 

Office Address:

751 Lakefront Commons Newport News, VA 23606

Éric A. Gallo

25,.

Secretary

Office Address:

751 Lakefront Commons Newport News, VA 23606 Ct

Diane V. Ivins **Assistant Secretary** 751 Lakefront Commons Office Address: Newport News, VA 23606 Brett Greenhalgh **Assistant Secretary** 2700 Crescent Springs Pike Office Address: Erlanger, KY 41017 Qiujing Xu **Assistant Secretary** 751 Lakefront Commons Office Address: Newport News, VA 23606 Brandi Champ-Gunter **Assistant Secretary** 751 Lakefront Commons Office Address: Newport News, VA 23606 Sally Pillars **Assistant Secretary** 751 Lakefront Commons Office Address: Newport News, VA 23606

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# Commonwealth of Kentucky Michael G. Adams, Secretary of State

Michael G. Adams
Secretary of State
P. O. Box 718
Frankfort, KY 40602-0718
(502) 564-3490
http://www.sos.ky.gov

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#### Certificate of Existence

Authentication number: 313913

Visit https://web.sos.ky.gov/fshow/certvalidate.aspx to authenticate this certificate.

I, Michael G. Adams, Secretary of State of the Commonwealth of Kentucky, do hereby certify that according to the records in the Office of the Secretary of State,

#### **CLAWFOOT SUPPLY, LLC**

CLAWFOOT SUPPLY, LLC is a limited liability company duly organized and existing under KRS Chapter 14A and KRS Chapter 275, whose date of organization is December 12, 2001 and whose period of duration is perpetual.

I further certify that all fees and penalties owed to the Secretary of State have been paid; that articles of dissolution have not been filed; and that the most recent annual report required by KRS 14A.6-010 has been delivered to the Secretary of State.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my Official Seal at Frankfort, Kentucky, this 25<sup>th</sup> day of June, 2024, in the 233<sup>rd</sup> year of the Commonwealth.



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Michael G. Adams Secretary of State Commonwealth of Kentucky 313913/0526990

Michael G. aldam