

M99000000365

Shoffner Industries LLC

Requestor's Name

5631 S. NC 62

Address

Burlington, NC 27215

City/State/Zip

Phone #

100002780251--0

-02/19/99--01022--006

*****87.50 *****87.50

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. 00789-01116-00676-01114-00647-01115-00671
(Corporation Name) (Document #)

2. _____ 100002780251--0
(Corporation Name) (Document #) -03/15/99--01076--002

3. _____
(Corporation Name) (Document #) *****197.50 *****197.50

4. W99-4676
(Corporation Name) (Document #)

- ☐ Walk in ☐ Pick up time _____ ☐ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

Name	Availability
Document	Examiner
Updater	
Updater	Verifier
Acknowledgement	
W. P. Verifier	

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
99 MAR 12 PM 4:37



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

February 24, 1999

SHOFFNER INDUSTRIES LLC
5631 S. NC 62
BURLINGTON, NC 27215

SUBJECT: SHOFFNER INDUSTRIES LLC
Ref. Number: W99000004676

We have received your document for SHOFFNER INDUSTRIES LLC and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The fees to qualify a foreign limited liability company total \$285.00 and breakdown as follows: \$250.00 filing fee for the application and affidavit and \$35 registered agent designation fee. An additional \$52.50 is due for each certified copy requested and an additional \$8.75 is due for each certificate of status requested.

There is a balance due of \$197.50.

The document must contain the name, title, and business address of each managing member or manager who will manage the foreign limited liability company in the state of Florida. Please insert "MGRM" in the title portion for each managing member and "MGR" in the title portion for each manager.

A certificate of existence, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

The affidavit must set forth the amount of the cash and a description and the agreed value of property other than cash contributed by the members, and the amount anticipated to be contributed by the members.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6967.

Michelle Hodges
Document Specialist

Letter Number: 099A00008623

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

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. SHOFFNER INDUSTRIES, LLC.
(Name of foreign limited liability company must end with the words "limited company" or their abbreviation "L.C." if not so contained in the name at present.)

2. MICHIGAN
(Jurisdiction under the law of which foreign limited liability company is organized)

3. 56-2112240
(FEI number, if applicable)

4. 12/27/98
(Date of Organization)

5. PERPETUAL
(Duration: Year limited liability company will cease to exist or "perpetual")

6. 11/1/99
(Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.)

7. 5631 S. NC 62
BURLINGTON NC 27215
(Street address of principal office)

8. List name, title, and business address of each managing member[MGRM] or manager[MGR]who will manage the foreign limited liability company in Florida: (attach additional page if necessary)

NAME & ADDRESS:

TITLE:

NAME & ADDRESS:

TITLE:

GARY A. WRIGHT

MGR

UNIVERSAL FOREST PRODUCTS
EASTERN DIVISION INC.

MGRM

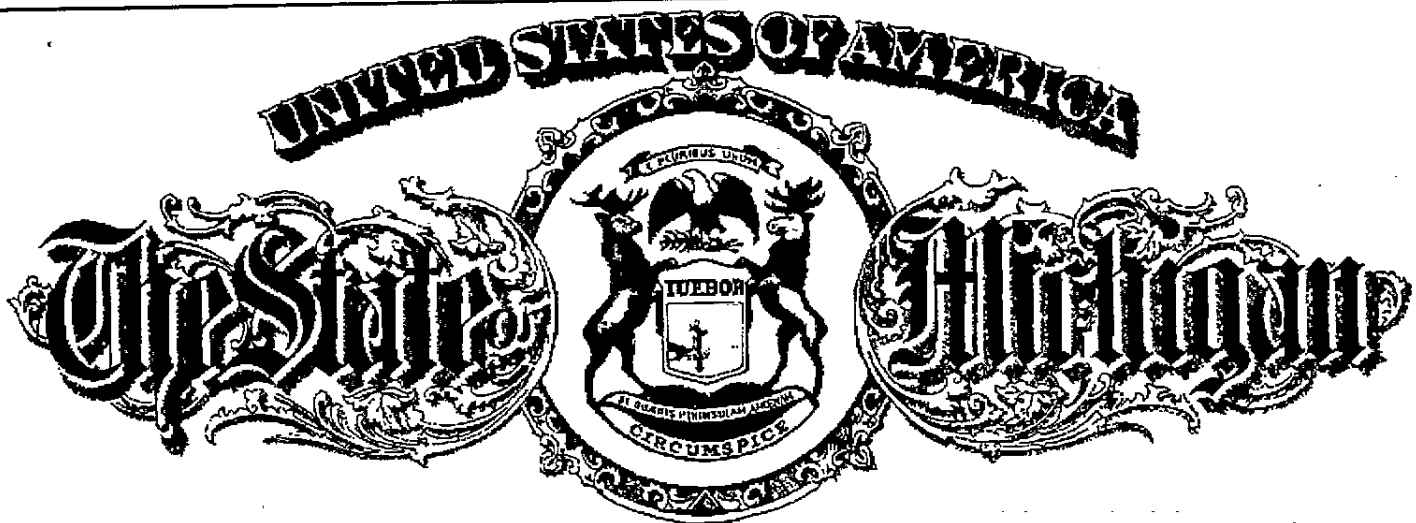
5631 S. NC 62

2801 E BELTLINE NE

BURLINGTON NC 27215

GRAND RAPIDS MI 49525

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
99 MAR 12 PM 4:37



Michigan Department of Consumer and Industry Services

Lansing, Michigan

This is to Certify That

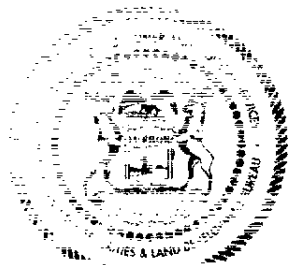
SHOFFNER INDUSTRIES, L.L.C.

a Michigan limited liability company, filed Articles of Organization in this office on December 17, 1998.

I FURTHER CERTIFY that the Articles are in full force and effect as of this date, and a Certificate of Dissolution has not been filed.

This certificate is in due form, made by me as the proper officer, and is entitled to have full faith and credit given it in every court and office within the United States.

In testimony whereof, I have hereunto set my hand and affixed the Seal of the Department, in the City of Lansing, this 2nd day of February, 1999.



171L 0409911

Julie Croll

, Director

Corporation, Securities and Land Development Bureau

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

- PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the limited liability company is:

SHOFFNER INDUSTRIES, LLC.

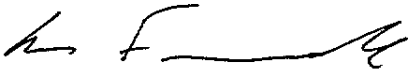
2. The name and address of the registered agent and office is:

CT CORPORATION SYSTEM
(Name)

1200 SOUTH PINE ISLAND ROAD
(P.O. Box or Mail Drop Box **NOT** ACCEPTABLE)

PLANTATION, FLORIDA 33324
(City/State/Zip)

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 certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.



(Signature)

**ALLAN FARNELL
ASSISTANT SECRETARY**

JAN. 11, 1999

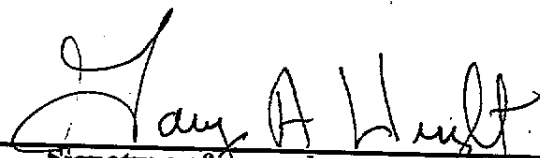
(Date)

Filing Fee: \$ 35 for Designation of Registered Agent

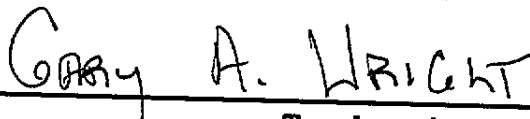
**AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS OF FOREIGN
LIMITED LIABILITY COMPANY**

The undersigned member or authorized representative of a member of SHOFFNER
INDUSTRIES, LLC. certifies:

- 1) the above named limited liability company has at least one member;
UNIVERSAL FOREST PRODUCTS EASTERN DIVISION INC
- 2) the total amount of cash contributed by the member(s) is \$ - 0 -;
- 3) if any, the agreed value of property other than cash contributed by member(s) is \$ - 0 -;
(A description of the property is attached and made a part hereto.)
and
- 4) the total amount of cash and property contributed and anticipated to be contributed
by member(s) is \$ - 0 -;
(This total includes amounts from 2 and 3 above.)



Signature of a member or an authorized representative of a member.
(In accordance with section 608.408(3), Florida Statutes, the execution of this
affidavit constitutes an affirmation under the penalties of perjury that the facts
stated herein are true.)



Typed or printed name of signee

Filing Fee: \$250.00 for Application and Affidavit