

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. P.2/3

APPLICATION
FOR
REINSTATEMENTFLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P19362

1. Corporation Name AmeriMark Building Products, Inc.

Principal Place of Business

Mailing Address

3101 Poplarwood Court, Suite 200
Raleigh, NC 27604

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, if Applicable

3. New Mailing Office Address, if Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

5/24/88

5. FEI Number

59-2512393

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1. Title(s)	2. Name of Officers and/or Directors	3. Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4. City / State / Zip
	See attached		
			200002168252--9 -05/06/97--01119--005 *****1575.08 *****1575.00
			200002168252--9 -05/06/97--01119--006 *****0.75 *****0.75

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

Arnold S. Weister
1208 US Highway One
North Palm Beach, FL 33408

Name CT Corporation System

Street Address (P.O. Box Number is Not Acceptable)

1200 South Pine Island Road

Suite, Apt. #, Etc.

City

Plantation

State

Zip Code

FL

33324

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0305, F.S.

Signature of
Registered AgentREGISTERED AGENT MUST SIGN
JENNIFER E. AULTMAN
ASSISTANT SECRETARY

4-25-97

11. Does this corporation pay any intangible tax to the
Dept. of Revenue under S. 199.032, Florida Statutes. Yes ☐ No ☒(See other side for information
on intangible tax.)

12. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(b), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Treasurer 4/18/97 (919) 876-9333

Date

Daytime Phone

AMERIMARK, INC.
OFFICERS

2682

Title	Name	Street Address City / State / Zip
President	Roger M. Scott	3101 Poplarwood Court, Suite 200 Raleigh, NC 27604
Vice Pres.	Daniel C. Goldman	3101 Poplarwood Court, Suite 200 Raleigh, NC 27604
Vice Pres.	James R. Smith	3101 Poplarwood Court, Suite 200 Raleigh, NC 27604
Treasurer	Richard H. Corey	3101 Poplarwood Court, Suite 200 Raleigh, NC 27604