

Filing Fee: \$50.00

ID Number: 000096385



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State
Corporations Division
148 W. River Street
Providence, Rhode Island 02904-2615

RECEIVED
SECRETARY OF STATE
CORPORATIONS DIVISION
2016 FEB 23 PM 3:00

FICTITIOUS BUSINESS NAME STATEMENT

Pursuant to the provisions of Section 7-1.2-402, 7-16-9 or 7-13-2 of the General Laws of Rhode Island, 1956, as amended, the undersigned business corporation, limited liability company, or limited partnership hereby submits the following statement for authority to transact business in the state of Rhode Island under a fictitious business name:

- 1. The legal name of the applicant business corporation, limited liability company or limited partnership is: Beacon Sales Acquisition, Inc.
2. The fictitious business name to be used is RIS Insulation Supply
3. The state or territory under the laws of which it is incorporated, organized or formed is Delaware
4. The date of incorporation, organization or formation is 8/13/1997
5. If a business corporation, the address of its registered office within Rhode Island is 222 Jefferson Blvd., Suite 200, Warwick, RI 02888
6. If a business corporation, the business in which it is engaged Commercial and residential roofing and related products
7. Applicant is otherwise authorized to do business in the state of Rhode Island.

Under penalty of perjury, I declare that the information contained herein is true and correct.

Date: December 21, 2015

Beacon Sales Acquisition, Inc.
Name of Applicant Corporation, Limited Liability Company or Limited Partnership

3:08 pm
FILED

FEB 23 2016

By 268370
KUM

By Ross D. Cooper
Signature of Authorized Officer of the Corporation
Ross D. Cooper, Exec. Vice President, General Counsel & Secretary

By
Signature of Authorized Person for the Limited Liability Company

By
Signature of Authorized Person for the Limited Partnership



State of Rhode Island and Providence Plantations  
**Department of State | Office of the Secretary of State**  
**Nellie M. Gorbea**, *Secretary of State*

I, NELLIE M. GORBEA, Secretary of State of the State of Rhode Island  
and Providence Plantations, hereby certify that this document, duly executed in  
accordance with the provisions of Title 7 of the General Laws of Rhode Island, as  
amended, has been filed in this office on this day:

A handwritten signature in blue ink, appearing to read "Nellie M. Gorbea". The signature is fluid and cursive, written in a professional style.

Nellie M. Gorbea  
*Secretary of State*

