RI SOS Filing Number: 201923961070 Date: 10/10/2019 11:33:00 AM

State of Rhode Island and Providence Plantations  Department of State - Business Services Division	
Application for Registration FOREIGN Limited Liability Company	BLIS
→ Filing Fee: \$150.00	<u> </u>
Pursuant to the provisions of RIGL <u>7-16-49</u> , the undersigned foreign limited liability company hereby applies for a Certificate of Registration to transact business in the State of Rhode Island, and for that purpose submits the following statement:  1. The name of the limited liability company is:	ָּ֖֖֖֖֖֖֖֖֖֖֖֖֖֖֖֖֖֖֖֖֖֖֖֖֖֖֖֖֖֖֖֖֖֖֖֖
Well Ditt Industries USA. LLC	· · · · · · · · · · · · · · · · · · ·
Is this company organized in its state or country of formation as a low-profit limited liability company?  The name, if different, under which it proposes to register and transact business in Rhode Island is:	Yes No 🔀
The hame, it different, under which it proposes to register and transact obsiness in Knode Island is.	
	R.1 2019
2. The LLC is organized under the laws of:	REP BUS DEF
3. The date of its organization is:	EIV FOR VCS
And the period of its duration is: CHECK ONE BOX ONLY	7 DI ST
Perpetual (on-going)	ATE V
Date certain for dissolution	7
4. The name and address of the resident agent/office in Rhode Island is:	
Agent Name Realstered Agents Inc.	
Street Address (NOT a P.O. Box)  1. Dichood School Street 1256	
City/Town State Zip Coo	de
Providence RHODE ISLAND 020	106
5. The purpose or purposes which it proposes to pursue in the transaction of business in Rhode Island Services For Prode TSland Army Wational	d are: GUOVd
- our company is veraining Hangor of	tors for
& replacing with new panels.  Check the box to indicate	ate an attachment 🗸

MAIL TO:

**Division of Business Services** 

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov ...30CL 10 WHI: 33

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6 The RI Department of State is appointed the agent of the foreign limited liability company for service of process if, at any time, there is no resident agent or if the resident agent cannot be found or served following the exercise of reasonable diligence.		
7. The address of the office required to be maintained in the state or country of its organization by the laws of that state or, if not so required, of the principal office of the foreign limited liability company is.		
3001 SW LOTHIAVE, OCALA FL. 34474		
8. The mailing address for the limited liability company is:		
3001 SW 67th Ave.	Orala FL 34474	
9. Management of the Limited Liability Company		
The Limited Liability Company is to be ma	naged by: CHECK ONLY ONE BOX	
By its members (If you have checked this box, go to Section 9. (DO NOT fill out the chart below.)		
By one (1) or more managers (List managers below)		
MANAGER	ADDRESS	
10. This application must be accompanied by a <u>Certificate of Good Standing/Letter of Status</u> from the state or country of formation dated within 60 days of the date of filing.		
11 Date when this application for Certifica	ite of Registration will be effective: CHECK ONE BOX ONLY	
Date received (Upon filing)		
Later effective date (Date must be no more than 90 days from the date of filing)		
Under penalty of perjury, I declare and affirm that I have examined this Application for Registration, including any accompanying attachments, and that all statements contained herein are true and correct.		
Type or Print Name of LLC	Date	
Well Bit Industries USALLC 9/11/19		
Signature of Authorized Person	SIGN DOCUMENT HERE	
<del></del>		

## State of Florida Department of State

I certify from the records of this office that WELL BILT INDUSTRIES USA, LLC is a limited liability company organized under the laws of the State of Florida, filed on October 12, 2009, effective October 12, 2009.

The document number of this limited liability company is L09000098426.

I further certify that said limited liability company has paid all fees due this office through December 31, 2019, that its most recent annual report was filed on August 7, 2019, and that its status is active.

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Given under my hand and the Great Seal of the State of Florida at Tallahassee, the Capital, this the Eleventh day of September, 2019

2019 SEP 27 PH 1:



Secretary of State

Tracking Number: 9680784393CU

To authenticate this certificate, visit the following site, enter this number, and then follow the instructions displayed.

https://services.sunbiz.org/Filings/CertificateOfStatus/CertificateAuthentication

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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:

October 10, 2019 11:33 AM

Nellie M. Gorbea Secretary of State

Tullin U. Soler

