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2020 JUL 21 AN 10: US

JUL 22 2020 M. SOLOMON CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

	ACCOUNT NO.	:	120000000195	
	REFERENCE	:	360746	3776A
	AUTHORIZATION	;	Squelle Ce	man
	COST LIMIT	:	\$ 90.00	
				-
ORDER DATE :	July 20, 2020			
ORDER TIME :	9:37 AM			
ORDER NO. :	360746-010			
CUSTOMER NO:	3776A			

FOREIGN FILINGS

NAME: WINSUPPLY GAINESVILLE FL CO.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

XX PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Amanda Robinson -- EXT# 62968

EXAMINER:

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

Winsupply Ga	inesville FL Co.			
(Enter name of	corporation; must include "INCORPORATED Corp," "Inc," "Co," or "Corp.")	," "COMPANY," "CORPORATION,"		
(If name unava	ilable in Florida, enter alternate corporate name	adopted for the purpose of transacting business	in Florida)	
Delaware 2.	3	85-1846433		
(State or coun	ntry under the law of which it is incorporated)	(FEI number, if applicable)		
4. 07/20/2020	5.	Perpetual		
	te of incorporation)	(Date of duration, if other than perpet	ual)	
6.				
	(Date first transacted business i (SEE SECTIONS 607.1501 & 607.1	in Florida, if prior to registration) 502, F.S., to determine penalty liability)		
7 c/o WGS - Com	apliance Services 3110 Kettering Blvd Moraine	OH 45439-1924		
• •		fice <u>street</u> address)		
•	(Current maili	ng address, if different)	Up Suph	2020
			<u></u>	120 JUL 21
8. Name and str	cct address of Florida registered agent: (P.	O. Box NOT acceptable)	ا الله الله الله	. 2
Name:	Corporation Service Company		e eg	
Office Address:	1201 Hays Street		intar .	AH IO: 06
	Tallahassee	, Florida	gar str	9
	(City)	(Zip code)		
Having been na designated in th further agree to	is application, I hereby accept the appoint	ice of process for the above stated corporate ment as registered agent and agree to act in relative to the proper and complete perform osition as registered agent.	n this capacit	ty. I
	Corporation Service Company		Arnanda Ro	hinean
	By: Imanda E. S.	luce	Asst. Vice P	
	(Registered agent's s	signature)		

10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

A. DIRECTORS See attached ☐ Chairman Name: □Chairman Name: _____ □Vice Chairman Address: ☐ Vice Chairman Address: □ Director ☐ Director □President ☐ President □Vice President ☐ Vice President ☐ Secretary □Treasurer ☐ Secretary ☐ Treasurer □Other __ Other □ Other _____ Other _____ □ Chairman Name: □ Chairman Name: Address: _____ □Vice Chairman Address: ☐ Vice Chairman □ Director ☐ Director ☐ President ☐ President □Vice President ☐ Vice President ☐ Secretary Treasurer ☐ Secretary ☐ Treasurer □Other _____ Other _____ □Other ___ ____ □ Chairman Name: □ Chairman Name: □Vice Chairman Address: ____ ☐ Vice Chairman Address: Director □ Director ☐ President □ President □Vice President ☐ Vice President ☐ Secretary □Treasurer □Treasurer ☐ Secretary Other ____ Other _____ ☐Other _____ 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.

Signature of Director or Officer

The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he or she is aware that 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.

Sean W. Culler, Treasurer

FLORIDA DEPARTMENT OF STATE **DIVISION OF CORPORATIONS**

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA WINSUPPLY GAINESVILLE FL CO.

SUPPLEMENTAL INFORMATION - OFFICER & DIRECTOR LISTING

Officers:

President & Chairman	Martice S. Madden	3310 N Main St Gainesville FL 32609-2306
Vice President & Vice Chairman	D. Michael Larkin	3110 Kettering Blvd Moraine OH 45439-1924
Secretary	Michael S. Kirkland	3110 Kettering Blvd Moralne OH 45439-1924
Treasurer	Sean W. Culler	3110 Kettering Blvd Moraine OH 45439-1924

Directors:

Martice S. Madden	3310 N Main St Gainesville FL 32609-2306
Arnold Har dy	855Brentwood Dr Daytona Beach FL 32117-4704
D. Michael Larkin	3110 Kettering Blvd Moralne OH 45439-1924
Robert W. Ferguson	3110 Kettering Blvd Moraine OH 45439-1924
John W. Simmons	3110 Kettering Blvd Moraine OH 45439-1924
Robert F. McCullough	3110 Kettering Blvd Moraine OH 45439-1924





I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "WINSUPPLY GAINESVILLE FL CO." IS DULY

INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD

STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS

OF THIS OFFICE SHOW, AS OF THE TWENTIETH DAY OF JULY, A.D. 2020.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "WINSUPPLY GAINESVILLE FL CO." WAS INCORPORATED ON THE TWENTIETH DAY OF JULY, A.D. 2020.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL FRANCHISE TAXES HAVE BEEN ASSESSED TO DATE.

TAYS OF THE PARTY OF THE PARTY

Authentication: 203313885

Date: 07-20-20