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CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500 ACCOUNT NO. : I2000000195 REFERENCE : 575811 4305966 AUTHORIZATION :/ COST LIMIT : \$ 125.00 ORDER DATE: March 28, 2022 ORDER TIME : 2:02 PM ORDER NO. : 575811-210 CUSTOMER NO: 4305966 FOREIGN FILINGS NAME: MOHAWK CARPET DISTRIBUTION, LLCXXXX QUALIFICATION (TYPE: LL) PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: \_\_\_ CERTIFIED COPY XX PLAIN STAMPED COPY

EXAMINER: \_\_\_\_

\_\_\_\_\_ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Alexxis Weiland -- EXT#

## **COVER LETTER**

TO:	Registration Section Division of Corporations				
SUBJEC	Mohawk Carpet Distribution, LLC				
		of Limited Liability Company			
The encl Existenc	losed "Application by Foreign Limited Liability Co ce, and check are submitted to register the above re	ompany for Authorization to Transact Business in Florida," Certificate of ferenced foreign limited liability company to transact business in Florida			
Please re	eturn all correspondence concerning this matter to	the following:			
	Jan R. Ezell, Corporate Paralegal				
	Name of Person				
	Alston & Bird LLP				
		Firm/Company			
	1201 West Peachtree Street				
		Address			
	Atlanta, GA 30309-3424				
	Cit	ty/State and Zip Code			
	compliancemail@cscglobal.com				
	E-mail address: (to be	used for future annual report notification)			
For furth	her information concerning this matter, please call	;			
Jan R. Ezell		404 881-7442 at ( )			
	Name of Contact Person	at () Area Code Daytime Telephone Number			
Mailing Address: Registration Section Division of Corporations		Street Address: Registration Section Division of Corporations			
	P.O. Box 6327 Tallahassee, FL 32314	The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			
	Enclosed is a check for the following amount:  Please make check payable to: FLORIDA DEPA  \$125.00 Filing Fee \$130.00 Filing Fee  Certificate of	& 🗆 \$155.00 Filing Fee & 🗆 \$160.00 Filing Fee, Certificate			

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

IN COMPLIANCE WITH SECTION 605,0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

Mohawk Carpet Dis				
(Name of Foreig	n Limited Liability Company; must include "Limited	Liability Company, ""L.L.C.," or "ELC.")		
f name unavailable, enter alternati	e name adopted for the purpose of transacting business in Flo	orida. The alternate name must include "Limited Liabili	ty Company," "L.L.C," or "LLC.")	
Delaware		58-2173403		
(Jurisdiction under the law of	which foreign limited liability company is organized)	3. (FEI number, if applicable)		
-	(Date first transacted business in Florida, if prior to re (See sections 605,0904 & 605,0905, F.S. to determin	gistration.) c penalty liability)	_	
160 S. Industrial Blvd., Calhoun, GA 30701		P.O. Box 12079, Calhoun G	A 30703	
eet Address of Principal Office)	<del></del>	6. (Mailing Address)		
Name and street addre	ss of Florida registered agent: (P.O. Box.)	NOT_acceptable)	<del></del>	
Name:	Corporation Service Company		2022 	
Office Address:	1201 Hays Street			
	Tallahassee	32301		
	(City)	Florida (Zip code)		
istered agent's accepting been named as regionated in this applications	gistered agent and to accept service of pro-	ocess for the above stated limited liabil egistered agent and agree to act in thi	lity company at the place	
	ons of all statutes relative to the proper are of my position as registered agent.  Corporation Service Company	id complete performance of my duties	, and I am familiar with	
	By: Cleans Weiter assiste	nt va president		
	[Registered agent's sign	ature)		

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage (up to six (6) total): Title or Capacity: Name and Address: Title or Capacity: Name and Address: James F. Brunk Name: Name: R. David Patton ■ Manager ■ Manager Address: 160 S. Industrial Blvd. Address: \_\_\_\_\_\_ □ Member □Member Calhoun, GA 30701 Calhoun, GA 30701 Authorized □ Authorized Person Person □Other □Other\_\_\_\_\_ Other\_ Other\_\_\_\_ □Manager Name: \_\_\_\_\_ □Manager Name: \_\_\_\_\_ □Member Address: \_ □Member Address: \_\_\_\_\_ □ Authorized □ Authorized Person Person □Other\_\_\_\_\_ □Other □Other\_\_\_ □Other\_\_\_\_ □Manager □Manager Name: \_\_\_\_\_ Address: □Member □Member Address: \_\_\_\_\_ ☐ Authorized □ Authorized Person Person Other\_\_\_\_ Other\_\_\_\_ □Other\_ Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Nonindexed individuals may be added to the index when filing your Florida Department of State Annual Report form. 9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted) 10. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any 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. Signature of an authorized person

Typed or printed name of signee

Terrell Gilbert

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## Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "MOHAWK CARPET DISTRIBUTION, LLC" IS

DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD

STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS

OFFICE SHOW, AS OF THE SIXTH DAY OF MAY, A.D. 2022.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "MOHAWK CARPET DISTRIBUTION, LLC" WAS FORMED ON THE TWENTY-EIGHTH DAY OF APRIL, A.D. 1995.

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

Authentication: 203368672

Date: 05-06-22

2502648 8300 SR# 20221836200