## TOCOCOCO 4190 TRANSMITTAL LETTER

To: Qualification/Tax Lien Section Division of Corporations		
SUBJECT: Coburn Analytic	al Services Inc. poration - must include suffix)	
Dear Sir or Madam:	,	)33310240 ·
The enclosed "Application by Foreign Corporation" (Certificate of Existence", and check are submitted to transact business in Florida.	on for Authorization to Transact Business and to register the above referenced foreign	in Florida, ************************************
Please return all correspondence concerning this r	natter to the following:	
Tim Coons		
Tim Cooris (Na	me of Person)	g general section of the section of
<u>Coburn Analy</u>	tical Services Inc.	
7011 Winter 1	Hill Court (Address)	. • •
Dayton OH	45459	
Dayton OH (Cir	ty/State/Zin)	i v=: =
_ (	-J. 2440. 24p)	<b>A</b> ES <b>8</b>
Should you need to call someone concerning this matter, please call:		
Tim Coons at (9)	37 , 914-7069	
(Name of Person) at (1	37 ) 904-7069 Area Code & Daytime Telephone Number	<u>)                                    </u>
	, , ,	7.55 9 9.58 9.2
STREET ADDRESS:	MAILING ADDRESS:	+
Qualification/Tax Lien Section Division of Corporations 409 E. Gaines St.	Qualification/Tax Lien Section Division of Corporations P.O. Box 6327	4mm 7/26
Tallahassee, FL 32399	Tallahassee, FL 32314	7/26
Enclosed is a check for the following amount:		1 -
□ \$70.00 Filing Fee □ \$78.75 Filing Fee & Certificate of Status	~ .~ /	Filing Fee,

Certified Copy

## 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.			
Col. A 1 til Sancian to 1			
(Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or			
words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)			
natural person of partiership in not so contained in the name at present.)			
2 Ohio 3 31-1584291			
2. Chio (State or country under the law of which it is incorporated)  3. 31-158429 (FEI number, if applicable)			
4. 1/27/98 5. Derpetual (Duration: Year corp. will cease to exist or "perpetual")			
8/1/20			
6. (Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)			
7. 72 N. Children's Home Rd.			
Troy OH 45373 SEE S (Current mailing address)			
8. To provide highly specialized technical engineering support services (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)			
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)			
9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)			
Name: Bobby Jones			
0-0-1/1/01/0			
Office Address: 258 Yacht Club Drive			
Fort Walton Roach Florida 32548			
Office Address: 258 Yacht Club Drive Fort Walton Beach, Florida, 32548 (Zip code)			
10. Registered agent's acceptance:			
10. Registes et agent s'acceptance.			
Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in			
this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept			
the obligations of my position as registered agent.			
Kabent C. Jona			
(Registered agent's signature)			
11. 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			

12. Names and addresses of officers and/or directors: (Street address ONLY - P.O. Box NOT acceptable)

which it is incorporated.

A. DIRECTORS (Street address only - P.O. Box NOT acceptable)	
Chairman:	
Address:	
Vice Chairman:	
Address:	
Director: James K. Coburn	
Address:	
Director: Timothy C. Coons	
Address:	
B. OFFICERS (Street address only - P.O. Box NOT acceptable)	T. 00
President: James K. Colourn	
Address: 72 N. Children's Home Rd	
Troy OH 45373	·
Vice President: Timothy C. Coons	
Address: 7011 Winter Hill Court	
Dayton OH 45459	
Secretary: Timothy C. Coons	
Address:	
Treasurer: James K Coburn	
Address:	_
NOTE: If necessary, you may attach an addendism to the application listing	g additional officers and/or directors.
(Signature of Chairman, Vice Chairman, or any officer lis	,
14. Tim Coons - Secretary of (Typed or printed name and capacity of	

## UNITED STATES OF AMERICA, STATE OF OHIO, OFFICE OF THE SECRETARY OF STATE.

I, J. Kenneth Blackwell, do hereby certify that I am the duly elected, qualified and present acting Secretary of State for the State of Ohio, and as such have custody of the records of Ohio and Foreign corporations; that said records show COBURN ANALYTICAL SERVICES, INC., an Ohio Corporation, Charter No. CP4041, having its principal location in Troy, County of Miami, was incorporated on January 27, 1998, is currently in GOOD STANDING upon the records of this office.

WITNESS my hand and official seal

Couneth Blackmell

at Columbus, Ohio on

June 14, 2000

J. Kenneth Blackwell Secretary of State