

# FO2000004220

CT CORPORATION SYSTEM

CORPORATION(S) NAME

Nuermont Corp.

FILED  
02 AUG 20 PM 2:07  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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|                                                           |                                                 |                                             |
|-----------------------------------------------------------|-------------------------------------------------|---------------------------------------------|
| <input type="checkbox"/> Profit                           | <input type="checkbox"/> Amendment              | <input type="checkbox"/> Merger             |
| <input type="checkbox"/> Nonprofit                        |                                                 |                                             |
| <input checked="" type="checkbox"/> Foreign qualification | <input type="checkbox"/> Dissolution/Withdrawal | <input type="checkbox"/> Mark               |
|                                                           | <input type="checkbox"/> Reinstatement          |                                             |
| <input type="checkbox"/> Limited Partnership              | <input type="checkbox"/> Annual Report          | <input type="checkbox"/> Other              |
| <input type="checkbox"/> LLC                              | <input type="checkbox"/> Name Registration      | <input type="checkbox"/> Change of RA       |
|                                                           | <input type="checkbox"/> Fictitious Name        | <input type="checkbox"/> UCC                |
| <input type="checkbox"/> Certified Copy                   | <input type="checkbox"/> Photocopies            | <input type="checkbox"/> CUS                |
| <input type="checkbox"/> Call When Ready                  | <input type="checkbox"/> Call If Problem        | <input type="checkbox"/> After 4:30         |
| <input checked="" type="checkbox"/> Walk In               | <input type="checkbox"/> Will Wait              | <input checked="" type="checkbox"/> Pick Up |
| <input type="checkbox"/> Mail Out                         |                                                 |                                             |

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02 AUG 20 AM 11:20  
DIVISION OF CORPORATION

Name \_\_\_\_\_  
Availability \_\_\_\_\_  
Document \_\_\_\_\_  
Examiner \_\_\_\_\_  
Updater \_\_\_\_\_  
Verifier \_\_\_\_\_  
W.P. Verifier \_\_\_\_\_

8/20/02

Order#: 5495451

Ref#: \_\_\_\_\_

Amount: \$ \_\_\_\_\_

660 East Jefferson Street  
Tallahassee, FL 32301  
Tel. 850 222 1092  
Fax 850 222 7615

3000007220713--4  
-08/20/02--01041--005  
\*\*\*\*\*70.00 \*\*\*\*\*70.00

**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*

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1. Nuermont Corp.  
(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.)
2. Georgia 3. 58-2453652  
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 03/25/1999 5. Perpetual  
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. Upon Qual  
(Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification.")  
(SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
7. 5910 Shiloh Road East, #103, Alpharetta, GA 30005  
(Principal office address)  
same  
(Current mailing address)
8. equipment installation  
(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: C T Corporation System  
Office Address: 1200 South Pine Island Road  
Plantation, Florida 33324  
(City) (Zip code)

**10. Registered 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.*

C T Corporation System  
By: Dale W. Morris **DALE W. MORRIS**  
(Registered agent's signature) **ASSISTANT VICE PRESIDENT**

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 which it is incorporated.

12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: See attachment

Address: \_\_\_\_\_

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

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B. OFFICERS

SEE ATTACHMENT

President: Manfred Kreuzer

Address: 5910 Shiloh Road East, #103

Alpharetta, GA 30005

Vice President: Peter Mertz

Address: 5910 Shiloh Road East, #103

Alpharetta, GA 30005

Secretary: Randall Mertz

Address: 5910 Shiloh Road East, #103 Alpharetta, GA 30005

Treasurer: Randall Mertz

Address: 5910 Shiloh Road East, #103 Alpharetta, GA 30005

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. [Signature]

(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Randy Mertz Operations Manager

(Typed or printed name and capacity of person signing application)

## Attachment to Florida

**Officers & Directors**

- 
- |    |                   |                             |
|----|-------------------|-----------------------------|
| 1. | Full Name:        | Manfred Kreuzer             |
|    | Officer/Director: | Officer, Director           |
|    | Officer's Title:  | President                   |
|    | Business Address: | 5910 Shiloh Road East, #103 |
|    | City:             | Alpharetta                  |
|    | State:            | GA                          |
|    | ZIP Code:         | 30005                       |
| 2. | Full Name:        | Peter Mertz                 |
|    | Officer/Director: | Officer                     |
|    | Officer's Title:  | Vice President              |
|    | Business Address: | 5910 Shiloh Road East, #103 |
|    | City:             | Alpharetta                  |
|    | State:            | GA                          |
|    | ZIP Code:         | 30005                       |
| 3. | Full Name:        | Randall Mertz               |
|    | Officer/Director: | Officer                     |
|    | Officer's Title:  | Secretary/Treasurer         |
|    | Business Address: | 5910 Shiloh Road East, #103 |
|    | City:             | Alpharetta                  |
|    | State:            | GA                          |
|    | ZIP Code:         | 30005                       |

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**Secretary of State**  
**Corporations Division**  
**315 West Tower**  
**#2 Martin Luther King, Jr. Dr.**  
**Atlanta, Georgia 30334-1530**

CONTROL NUMBER : K913349  
DATE INC/AUTH/FILED: 03/25/1999  
JURISDICTION : GEORGIA  
PRINT DATE : 08/05/2002  
FORM NUMBER : 211

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02 AUG 20 PM 2:07  
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TALLAHASSEE, FLORIDA

CT CORPORATION SYSTEM  
RACHEL HAYES  
1201 PEACHTREE STREET, N.E.  
ATLANTA, GA 30361

**CERTIFICATE OF EXISTENCE**

I, Cathy Cox, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that as of the above print date

**NUERMONT CORP.**  
**A GEORGIA PROFIT CORPORATION**

is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated.

Said entity was formed in the jurisdiction stated above or was authorized to transact business in Georgia on the above date and has not filed articles of dissolution, certificate of cancellation or any other similar document with the Office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the print date above. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This information is electronically transmitted, issued and certified in accordance with the Georgia Electronic Records and Signatures Act and Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

20020805163517289



*Cathy Cox*

Cathy Cox  
Secretary of State