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(Requ	lestor's Name)	
(Address)		
(Address)		
(City/	State/Zip/Phone	· #)
PICK-UP	☐ WAIT	MAIL .
(Busi	ness Entity Nam	ne)
(Docı	iment Number)	
Certified Copies	Certificates	of Status
Special Instructions to Fi	ling Officer:	
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SECRETARY OF STATE

MAR 23 2009 D. A. WHITE

COVER LETTER

TO: New Filing Section Division of Corporations		
SUBJECT: Glover Contracting Co., I	nc.	
	ation - must include suffix)	
Dear Sir or Madam:		
The enclosed "Application by Foreign Corporation I "Certificate of Existence," and check are submitted t transact business in Florida.	or Authorization to Transact Business in Florida," o register the above referenced foreign corporation to	
Please return all correspondence concerning this mat	ter to the following:	
Matthew B. Glover		
(Name	of Person)	
Glover Contracting Co., Inc.	•	
	Company)	
PO Box 40		
(Ac	idress)	
Pleasant Hill, NC 27866	•	
	te and Zip code)	
For further information concerning this matter, please	call:	
Traig B. Neal	, 536-2660	
Traig B. Neal at (252) 536-2660 (Name of Person) (Area Code & Daytime Telephone Number)		
()		
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	MAHLING ADDRESS: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	
Enclosed is a check for the following amount:		
\$70.00 Filing Fee \$\sum \text{S78.75 Filing Fee & Certificate of Status}	S78.75 Filing Fee & S87.50 Filing Fee. Certified Copy Certificate of Status & Certified Copy	



DEPARTMENT OF STATE
09 MAR 19 AM 11: 44

FLORIDA DEPARTMENT OF STATE Division of Corporations

March 3, 2009

MATTHEW B. GLOVER GLOVER CONTRACTING CO., INC. PO BOX 40 PLEASANT HILL, NC 27866

SUBJECT: GLOVER CONTRACTING CO., INC.

Ref. Number: W09000010008

We have received your document for GLOVER CONTRACTING CO., INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

If you have any questions concerning the filing of your document, please call (850) 245-6933.

Dale White Regulatory Specialist II

Letter Number: 509A00007289

and the condition of the second section and the second section of the second section is

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.

North Co.	•	e adopted for the purpose of transacting business in Florida)
North Car	under the law of which it is incorporated)	56-1532468 For FEI number, if applicable)
April 1, 19	, , , ,	Perpetual
	e of incorporation)	(Duration: Year corp. will cease to exist of (Direction)
February	14, 2009	Eg D
	(Date first transacted business (SEE SECTIONS 607.1501 & 607.	in Florida, if prior to registration) 1502, F.S., to determine penalty liability)
4493 05 3	301 Highway, Pleasant Hill, I	
PO Box 4	D, Pleasant Hill, NC 27866	uicas)
	(Current mailing ad	dress)
Cantrasta	al Islandina	
Contracte	u nauning s) of corporation authorized in home state or c	country to be carried out in state of Florida)
Name and street	et address of Florida registered agent: (P.	•
Name:	Corporation Service Comp	arry
ffice Address:	1207 Hays St.	·
	Tallahassee	, Florida 32301 (Zip code)
	(City)	(Zip code)
	gent's acceptance:	
. Registered as	•	in of means for the above stated companion at the plan
ving been nam	ed as registered agent and to accept serv	nce of process for the anove stated corporation at the place ment as registered agent and agree to act in this capacity.

Doreen Wallace

11. Attached is a certificate of existence duly authenticated, not more than Sold approved approved approved 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	FILED
Chairman:	
Address:	SECRETARY UF STATE
Vice Chairman:	TALLAHASSEE, FLORID
Address:	
Director;	•
Address:	
Director:	
Address:	
B. OFFICERS President: John Mark Glover	
Pleasant Hill, NC 27866	
fice President:	
ddress:	
Matthew Brian Glover	
ddress: PO Box 40, Pleasant Hill, NC 27866	
eusurer: Matthew Brian Glover	
PO Box 40, Pleasant Hill, NC 27866	
OTE: If necessary, you play attach an addendum to the application listing add	itional officers and/or directors.
(Signature of Director or Officer listed in number 12 of the	application)
Matthew Brian Glover, Secretary/Treasurer	•

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



NORTH CAROLINA Department of The Secretary of State

CERTIFICATE OF EXISTENCE

I, ELAINE F. MARSHALL, Secretary of State of the State of North Carolina, do hereby certify that

GLOVER CONTRACTING CO., INC.

is a corporation duly incorporated under the laws of the State of North Carolina, having been incorporated on the 1st day of April, 1975, with its period of duration being Perpetual.

I FURTHER certify that, as of the date set forth hereunder, the said corporation's articles of incorporation are not suspended for failure to comply with the Revenue Act of the State of North Carolina; that the said corporation is not administratively dissolved for failure to comply with the provisions of the North Carolina Business Corporation Act; that its most recent annual report required by N.C.G.S. 55-16-22 has been delivered to the Secretary of State; and that the said corporation has not filed articles of dissolution as of the date of this certificate.

ZOON MAR IN P 4: 03
SECRETARY OF STATE
TALL AHASSEFF, FLORIDA

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 13th day of January, 2009.

OF PARTIES OF STATE O

Secretary of State

Elaine I. Marshall