## F11000000035

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J. Shivere JAN 04 2011

## **COVER LETTER**

TO: New Filing Section Division of Corporations	
SUBJECT: Tecmer, Inc.	
Name of corporation - must include suffix	
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation for Authorization to Trans "Certificate of Existence," or "Certificate of Good Standing" and check are su above referenced foreign corporation to transact business in Florida.	
Please return all correspondence concerning this matter to the following:	
Thomas R. Drake	
Name of Person	
Tecmer, Inc.	
Firm/Company	
800 Spring Forest Dr.	
Address	
Lawrenceville, GA 30043	
City/State and Zip code	
trdrake@tecmer-inc.com	
E-mail address: (to be used for future annual repor	· · · · · · · · · · · · · · · · · · ·
For further information concerning this matter, please call:	ZUII JAH -4
Thomas R. Drake at (770 ) 237-5949	SS
Name of Person Area Code & Daytime Telep	phone Number
New Filing Section New Filing	ADDRESS: 55 Section Corporations 327
Enclosed is a check for the following amount:	0
\$70.00 Filing Fee \$78.75 Filing Fee & Certificate of Status Certified Copy	\$87.50 Filing Fee, Certificate of Status & 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.

(If name unavai	lable in Florida, enter alternate corporate	name	adopted for the purpose of transacting business in Florida)
Louisiana			72-112-7851
State or country	under the law of which it is incorporated	i)	(FEI number, if applicable)
July	19, 1988	5.	perpetual
(Dat	e of incorporation)	_	(Duration: Year corp. will cease to exist or "perpetual")
	June 2004		
			n Florida, if prior to registration) 502, F.S., to determine penalty liability)
	800 Spring Forest Dr., La		
	(Principal offi	ce add	ress)
	Same as	Abo	ove
	(Current maili	ng add	ress)
The purpo	,		•
	se of Tecmer, Inc. is to pr	ovic	le technical staffing to the Utilities.
(Purpose(	se of Tecmer, Inc. is to pr	OVIC	le technical staffing to the Utilities.  Duntry to be carried out in state of Florida)  D. Box NOT acceptable)
(Purpose(	se of Tecmer, Inc. is to pr	OVIC	Description of the Utilities.
(Purpose( Name and streeth) Name:	ese of Tecmer, Inc. is to press) of corporation authorized in home state et address of Florida registered agent	OVIC	De technical staffing to the Utilities.  Description of Florida Desc
(Purpose) Name and stre	ese of Tecmer, Inc. is to preson of corporation authorized in home stated address of Florida registered agentary Rebecca Vera	OVIC	Description of the Utilities.  Description of Florida Description of

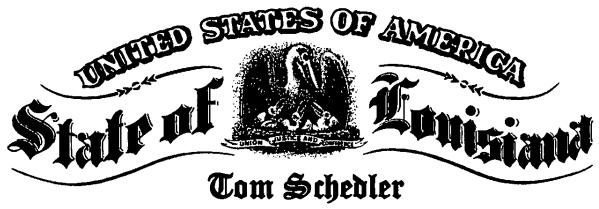
## 10. Registered agent's acceptance:

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.

(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 which it is incorporated.

12. Names and business addresses of officers and/or directors:			
A. DIRECTORS			
Chairman:			
Address:			
Vice Chairman:			
Address:			
Director:		·····	
Address:			
Director:			
Address:		- 83	
		2011	STATES
B. OFFICERS	Ab	=	es con
President: Thomas R. Drake	<u> </u>	<u></u>	Ç. 34
Address: 800 Spring Forest Drive	- 12 	呈	F #
Lawrenceville, GA 30043	, v	ပ္ <u>ပ</u> ာ	
Vice President: Maria E. Drake	·.		
Address: 404 Springbottom Court			
Lawrenceville, GA 30045			
Secretary: Maria E. Drake	·		· · ·
Address: Same as above			
Treasurer: Thomas R. Drake			
Address: Same as above			
NOTE: If necessary, you may attach an addendum to the application listing additional officers	and/or direc	ctors.	
13.		_	
Signature of Director or Officer  The officer or director signing this document (and who is listed in number 12 above) affirms th are true and that he or she is aware that false information submitted in a document to the Departhird degree felony as provided for in s.817.155, F.S.  Thomas R Drake - President			



SECRETARY OF STATE

As Secretary of State of the State of Louisiana, I do hereby Certify that

TECMER, INC.

A corporation domiciled in BATON ROUGE, LOUISIANA,

Filed charter and qualified to do business in this State on July 19, 1988,

I further certify that the records of this Office indicate the corporation has paid all fees due the Secretary of State, and so far as the Office of the Secretary of State is concerned is in good standing and is authorized to do business in this State.

I further certify that this Certificate is not intended to reflect the financial condition of this corporation since this information is not available from the records of this Office.

In testimony whereof, I have hereunto set my hand and caused the Seal of my Office to be affixed at the City of Baton Rouge on,

December 27, 2010

Secretary of State

Certificate ID: 10126916#ULJ62

To validate this certificate, visit the following web site, go to Commercial Division, Certificate Validation, then follow the instructions displayed. www.sos.louisiana.gov

Web GSC