F14000005459

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

Office Use Only



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COVER LETTER

TO:	New Filing Sec Division of Cor		`	
SUBJI	ECT:	ethel Engineering, 1		
		Name of corporat	tion - must include suffix	
Dear Si	r or Madam:			
"Certifi	icate of Existence		for Authorization to Transac Standing" and check are subr siness in Florida.	
Please i	return all corresp	ondence concerning this ma	itter to the following:	
1	ROBERT M. GA	LLOWAY, ESQ.		
		Name	of Person	
•	GALLCWAY, WE	TTERMARK, EVEREST &	RUTENS, LLP.	
		Firm/C	Company	
]	P.O. Box 166	29		
		Ac	ldress	
I	Mobil∈, AL	36616		
		City/Stat	e and Zip code	
b	gallcway@gal	lowayllp.com		
		E-mail address: (to be us	ed for future annual report no	otification)
For furt	ther information	concerning this matter, plea	se call:	
Robe:	rt M. Gallow	ay at (251) 476-4493	
	Name of Person		ea Code & Daytime Telepho	ne Number
Enclose	New Filing Sec Division of Cor Clifton Building 2661 Executive Tallahassee, FL	porations 3 Center Circle	MAILING AD New Filing Sec Division of Cor P.O. Box 6327 Tallahassee, FL	ction rporations
\$70	.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & 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.

	ngineering, Inc. orporation; must include "INCORPORATE lorp," "Inc," "Co," or "Corp.")	ED,	' "COMPANY," "CORPORATION,"	
(If name unavail	able in Florida, enter alternate corporate na	ne	adopted for the purpose of transacting business in Florida)
Alabama (State or country under the law of which it is incorporated) 08/13/12			3. 46-0819102 (FEI number, if applicable)	
			(Date of incorporation)	
	•		1 Florida, if prior to registration)	_
5500 lool	•		502, F.S., to determine penalty liability)	<u></u>
5500 Jaci	kson Road, Mobile, Al, 3			-
Doot Office	(Principal office a		•	
Post Offic	e Box 851175, Mobile, Al,			<u>_</u> ;;;
	(Current mailing a	add	ress)	
Name and stre	et address of Florida registered agent: ((P.C	D. Box NOT acceptable)	1:27
Name: InCorp Services, Inc.			·	
ffice Address:	17888 67th Court North			
	Loxahatchee		, Florida 33470	
	(City)		(Zip code)	

9. 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.

Medicined agent's signature)

(Registered agent's signature)

10. 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.

11. Names	s and business addresses of officers and/or directors:					
A. DIREC	CTORS					
Chairman:	Vince LaCoste					
Address:	1750 Winterberry Street					
	Mobile, Al 36695					
Vice Chairm	nan:					
Address:						
Director: _	Vince LaCoste					
Address:	1750 Winterberry Street					
	Mobile, AL 36695					
Director:						
Address:						
B. OFFIC	CERS					
President: _	Vince LaCoste					
Address:	1750 Winterberry Street					
****	Mobile, AL 36695					
Vice Preside	ent:					
_						
Secretary: _	Vince LaCoste					
Address:	1750 Winterberry Street, Mobile, Al 36695					
Treasurer: _	Vince LaCoste					
Address:	1750 Winterberry Street, Mobile, AL 36695					
NOTE: If	necessary, you may attach an addendum to the application listing additional officers and/or directors.					
12.	i Julius Comment of the Comment of t					
are true and	Signature of Director or Officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein d that he or she is aware that false information submitted in a document to the Department of State constitutes ree felony as provided for in s.817.155, F.S.					
12 V	ince LaCoste, President					

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

Jim Bennett Secretary of State P.O. Box 5616 Montgomery, AL 36103-5616

STATE OF ALABAMA

I, Jim Bennett, Secretary of State of Alabama, having custody of the Great and Principal Seal of said State, do hereby certify that

the entity records on file in this office disclose that BETHEL ENGINEERING, INC. was formed in Mobile County, Alabama on August 13, 2012. The Alabama Entity Identification number for this entity is 073-189. I further certify that the records do not disclose that said entity has been dissolved, cancelled or terminated.



20141212000003110

In Testimony Whereof, I have hereunto set my hand and affixed the Great Seal of the State, at the Capitol, in the city of Montgomery, on this day.

12/12/2014

Date

di sum

Jim Bennett

Secretary of State