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COURIER ADDRESS:

TO:

Qualification/Tax Lien Section

Qualification/Tax Lien Sec. Division of Corporations 409 E. Gaines St Tallahassee, FL 32399

MAILING ADDRI

Qualification/Tax | Division of Corpora P. O. Box 6327 Tallahassee, FL 323

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:

(Name of corporation: must include the word "INCORPORATED", "COMPANY", "CORPORATION" words or abbreviations of like import in language as will clearly indicate that it is a corporation instead	7 1- >	<u> </u>
natural person or partnership it not so contained in the name at present.)		
2. (State or country under the law of which it is incorporated) 3. 58-2152862 (FEI number, if applicable)		-
4. Z-75 (Date of Incorporation) 5. PRITUAL (Duration: Year corp. will cease to exi "perpetual")	st or	<u>-</u>
6. (Date first transacted business in Florida. (See sections 607.1501, 607.1502, AND 817.155, F.S.)	_&_	-Siring
7. 820 W-740-71 Cont	AUS -	-02 -02
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ATCANTA CA 3033Co. (Current mailing address)	A+- 8:	25.25 25 25 25 25 25 25 25 25 25 25 25 25 2
8. Pay: = TX SA = TX S	0	4년 1년 1년 1년 1년 1년 1년 1년 1년 1년 1년 1년 1년 1년
 Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box acceptable) 		
Name: Tom HACC		
Office Address: 873 Coroc lety		
BUTE VENCE, Florida, 3208	<u>'2</u>	
10. Registered agent's acceptance:		
Having been named as registered agent and to accept service of process for the abcorporation at the place designated in this application, I hereby accept the apportunity agent and agree to act in this capacity. I further agree to comply with the prall statutes relative to the proper and complete performance of my duties, and I am far and accept the obligations of my position as registered agent.	intmer ovisio	nt as ns of
Sou Have (Registered agent's signature)		
11. Attached is a certificate of existence duly authenticated, not more than 90 days prior t delivery of this application to the Department of State, by the Secretary of State or oth official having custody of corporate records in the jurisdiction under the law of which incorporated.	eг	

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12. Na N	mes and addresses of officers and/or directors: (Street address ONLY- P. O. Box OT acceptable)
A. DI	RECTORS (Street address only- P. O . Box NOT acceptable)
Chairn	nan:
Addres	s:
Vice C	hairman:
Addres	s:
Directo	r:
	s:
Addica	
Directo	r:
	e of the second
	5
B. OF	FICERS (Street address only- P. O. Box NOT acceptable)
Preside	nt: R. Michael LaBounty
Addres	s: 1202 Haven Brook Way
	aylanta, GA 30319
Vice Pr	esident: DON Davis
Addres	s: 995 Westersham Pl
	Marietta, GA 30064
Secreta	ry: William Scott Mondy
Addres	s: 820 Wendell Court
	<u> <u>Atlanta</u> BA 30336</u>
Treasur	er:
Addres	s:
	If necessary, you may attach an addendum to the application listing additional and/or directors.
· · · · · ·	(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)
14. <u>/</u>	(Typed or printed name and capacity of person signing application)

Secretary of State Business Information and Services

Duite 315, West Tomer 2 Martin Luther King Ir. Dr. Atlanta, Georgia 30334-1530

DOCKET NUMBER : 961980523
CONTROL NUMBER : 9504091
DATE INC/AUTH/FILED: 02/06/1995
JURISDICTION : GEORGIA
PRINT DATE : 07/16/1996
FORM NUMBER : 211

APRIL MURPHY 820 WENDELL CT ATLANTA GA 30336

CERTIFICATE OF EXISTENCE

1, the Secretary of State of the State of Georgia, do hereby certify under CRECONSTANCE

SAFETY HOIST & CRANE SERVICE OF GEORGIA, INC.

A DOMESTIC PROFIT CORPORATION

was formed in the jurisdiction stated above or was authorized to transact business in Georgia on the above date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated 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 date issued. 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 certificate is issued pursuant to 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.

LEWIS A. MASSEY
SECRETARY OF STATE

