F000000046a

TRANSMITTAL LETTER

	То:			Tax Lien Section rporations	ı					
	SUBJE	ECT:	NEEL-	SCHAFFER, II	NC.					
	50231			··		oration - must include s	suffix)		•	
	Dear S	ir or Ma	adam:							
	"Certif	icate of	'Applica Existenci iness in I	e", and check a	Corporation e submitted	for Authorization to I	Transact Busin referenced fore	ess in Florida", eign corporation		
	Please	return a	Il corres	ondence conce	ning this m	atter to the following:				
				SLADE F.	EXLEY	ا بالراب اليا	.30000 '''	003106353ア -01/21/0001070004		
			(Name of			ne of Person)	*3	******78.75 *****78.75		
				NEEL-SCHA	IFFER, II	VC.				
					(Firm	/Company)		:		
				P.O. BOX	22625				, .	
					,	Address)			<u>D</u>	
				JACKSON,		225–2625	÷ =	_ 0	SEC	
	C2 11		•			/State/Zip)		00 JAN 21	NA OF CU	
	Should	you nee	d to call	someone conce	ming this m	atter, please call:			Mass O.	
	SI		EXIE		at (- ·	N 10: 06		
		(Name	of Perso	n)	(Aı	rea Code & Daytime T	elephone Num	ber)	ξΩ	
Name 1/3/ Availability	ω lo	ET_ADD	1	Section		MAILING ADD				
Document Examiner	Division 409 E. (Tallaha	rof-€or Gaines S	poration t.	s		Division of Corp. P.O. Box 6327 Tallahassee, FL	orations			
Upda'er	Enclose	d is a ch	eck for t	he following am	ount:					
Morray Ve liver	□ \$70.0	00 Filin	g Fee	☑ \$78.75 Filin Certificate		\$78.75 Filing Fee Certified Copy		50 Filing Fee, tificate of Status	&	
Acknowlet je.	it Ent	D(ij			· - • ·			tified Copy		
W. P. Verifye	r	0								

EUROCOCOCOCO

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.

1.	NEEL-SCHAFFER, INC.	-	9 -	-				
	(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 t							
2.			_ 3.	64-0671634				
(S	(State or country under the law of which it is incorporate		(FEI number, if applicable)					
4.		··5		99 YEARS		_		
	(Date of incorporation)		(Duration:	Year corp. will cease to exist or "perpetual")				
6.	NONE CONDUCTED TO DATE							
	(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)							
7.	666 NORTH STREET, SUITE 201			P.O. BOX 22625				
	JACKSON, MS 39202		÷ .	39225–2625	00	0I√S		
	(Current ma	iiling a	ddress)			SC:		
	CONSULTING ENGINEERING				JAN 21			
8.								
	(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 registere	d age	nt: (P.O.	Box or Mail Drop Box $\underline{\mathbf{NOT}}$ acceptable)	90 :01 HV			
	Name: C T CORP SYSTEM				36	10HS		
_				· · · · · · · · · · · · · · · · · · ·	•			
O.	ffice Address: 1200 SOUTH PINE IS	<u>SLANI</u>	D ROAD	·				
	PLANTATION			, Florida, <u>33324</u>				
				(Zip code)		. •		
10). Registered agent's acceptance:							
	•							
He	aving been named as registered agent and to accept is application, I hereby accept the appointment as re	service	e of proces.	s for the above stated corporation at the place	design	ıated in		
wi	th the provisions of all statutes relative to the proper e obligations of my position as registered agent.	and c	omplete pe	at agree to act in this capacity. I farmer agree erformance of my duties, and I am familiar wi	e to co ith and	mpty! accept		
	SEE FORM ATTAC	HED						
(Registered agent's signature)								
11 De	. Attached is a certificate of existence duly authentical partment of State, by the Secretary of State or other controls.	ated, no	ot more tha having cus	un 90 days prior to delivery of this application t stody of corporate records in the jurisdiction un	o the der the	law of		

which it is incorporated.

^{12.} Names and addresses of officers and/or directors: (Street address ONLY - P.O. Box NOT acceptable)

A. DIRECTORS (Street address only - P.O. Box NOT acceptable) Chairman: W. HIBBETT NEEL 666 NORTH STREET, SUITE 201 Address: 39202 JACKSON, MS 666 NORTH STREET, SUITE 201 Address: JACKSON MS 39202 SLADE F. EXLEY Director: Address: 666 NORTH STREET, SUITE 201 JACKSON MS 39202 Director: (SEE ATTACHED) Address: B. OFFICERS (Street address only - P.O. Box NOT acceptable) W. HIBBETT NEEL President: 666 NORTH STREET, SUITE 201 Address: JACKSON, MS 39202 J. GORMAN SCHAFFER Vice President: _____ 666 NORTH STREET, SUITE 201 Address: _____ JACKSON, MS 39202

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

12. (continued)

Name	12.A.*	12.B.	Address
John G. Sigman	Director	Senior Vice President	666 North Street, Suite 201
Julian Barksdale	Director	Vice President	Jackson, MS 39202 666 North Street, Suite 201
Mark G. Bailey	Director	Vice President	Jackson, MS 39202 666 North Street, Suite 201
Charles L. Lott, Jr.	Director	Vice President	Jackson, MS 39202 666 North Street, Suite 201
Randall L. Meador	Director	Vice President	Jackson, MS 39202 704 Hardy Street
Richard I Riggins	Director	Vice President	Hattiesburg, MS 39401 Hobbs Building, Suite 310
Randy Thompson	Director	Vice President	4205 Hillsboro Road Nashville, TN 37215 Hobbs Building, Suite 310 4205 Hillsboro Road
Robert B. Hearn	Director	Vice President	Nashville, TN 37215 8335 Kelwood Avenue, Suite D
K. Nelson Lucius	Director	Vice President	Baton Rouge, LA 70806-4804 101 South Front Street
A. Cecil Jones	Director	Vice President	Tupelo, MS 38801 5004 Fifth Avenue South Birmingham, AL 35212

^{*} All Neel-Schaffer Officers serve on the Board of Directors

ACCEPTANCE OF APPOINTMENT

RE: NEEL-SCHAFFER INC.

Pursuant to Sections 48.091 and 607.0501, Florida Statutes, the undersigned acknowledges and accepts its appointment as registered agent of the above corporation and agrees to act in the capacity and to comply with the provisions of the Florida Business Corporation Act (1990) relative to keeping open the registered office at the address specified above. The undersigned is familiar with, and accepts the obligations of, Section 607.0505, Florida Statutes.

Dated: January 11, 2000

T CORPORATION SYSTEM

Jonathan L. Miles, Assistant Secretary

State of Mississippi

Secretary of State's Office Eric Clark

Secretary of State Jackson, Mississippi

CERTIFICATE OF EXISTENCE/AUTHORITY

I, ERIC CLARK, Secretary of State of the State of Mississippi, and as such, the legal custodian of the corporate records, required by the laws of Mississippi, to be filed in my office, do hereby certify:

That on February 04,1983 the state of Mississippi issued a Charter/Certificate of Authority to:

NEEL-SCHAFFER, INC.

That the state of incorporation is MISSISSIPPI.

THAT THE PERIOD OF DURATION IS 99 YEARS.

That according to the records of this office, Articles of Dissolution or a Certificate of Withdrawal have not been filed.

That according to the records of this office, a current Annual Report has been delivered to the Office of the Secretary of State.

I further certify that all fees, taxes and penalties owed to this state, as reflected in the records of the Secretary of State, have been paid and that the corporation is in existence or has authority to transact business in Mississippi.

> Given under my hand and seal of office January 14,2000

ERIC CLARK, Secretary of State

