

F00000001881

TRANSMITTAL LETTER

To: Qualification/Tax Lien Section
Division of Corporations

SUBJECT: ENERGY SOLUTIONS, INC.
(Name of corporation - must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida", "Certificate of Existence", and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

SANDRA POLLOCK

(Name of Person)

ENERGY SOLUTIONS, INC.

(Firm/Company)

P O BOX 4252

(Address)

COLUMBUS, GA 31904

(City/State/Zip)

200003158942--5
-03/06/00--01128--012
*****70.00 *****70.00

FILED
00 APR -5 PM 3:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Should you need to call someone concerning this matter, please call:

SANDRA POLLOCK

(Name of Person)

at (706) 324-1650

(Area Code & Daytime Telephone Number)

STREET ADDRESS:

Name	Availability	Qualification/Tax Lien Section
Document Examiner		Division of Corporations
		409 E. Gaines St.
		Tallahassee, FL 32399
Updater		Enclosed is a check for the following amount:
Updater Verifier	<input type="checkbox"/> \$70.00 Filing Fee	<input type="checkbox"/> \$78.75 Filing Fee & Certificate of Status
Acknowledgement	DCC	
W. P. Verifier	DCC	

MAILING ADDRESS:

Qualification/Tax Lien Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

① date first transacted business
② name not available

☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy

F00000001881



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

March 9, 2000

SANDRA POLLOCK
ENERGY SOLUTIONS, INC.
P.O. BOX 4252
COLUMBUS, GA 31904

SUBJECT: ENERGY SOLUTIONS, INC.
Ref. Number: W00000006447

We have received your document for ENERGY SOLUTIONS, 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 name designated in your document is not available. Therefore, the corporation must adopt an alternate name for use in the state of Florida. To adopt an alternate name the corporation must submit a corporate resolution by the board of directors adopting the alternate name for use in the state of Florida. Please note the corporate resolution must be signed by the chairman, vice chairman, or an officer of the corporation. The alternate name must contain a corporate suffix. Such suffixes include: Corporation, Corp., Incorporated, Inc., Company, and CO.

Please RETURN ALL DOCUMENTATION to the ATTENTION of the DOCUMENT SPECIALIST indicated.

The date first transacted business in Florida within the meaning of s. 607.1501 or 608.501, F.S., must be set forth in section 6 of the application. If the corporation/limited liability company has not yet transacted business in Florida within this meaning, please insert the words "upon qualification" in lieu of a date. (Note: Pursuant to s. 607.1502(4), F.S., this office collects a civil penalty of \$1000 for each year other than the application filing year, that a foreign corporation or limited liability company transacts business in this state without authority along with the past annual report/uniform business report fees due this office.)

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6913.

Diane Cushing
Corporate Specialist

Letter Number: 600A00013241



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

March 23, 2000

SANDRA POLLOCK
ENERGY SOLUTIONS, INC.
P.O. BOX 4252
COLUMBUS, GA 31904

SUBJECT: ENERGY SOLUTIONS, INC.
Ref. Number: W00000006447

We have received your document for ENERGY SOLUTIONS, 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 date first transacted business in Florida within the meaning of s. 607.1501 or 608.501, F.S., must be set forth in section 6 of the application. If the corporation/limited liability company has not yet transacted business in Florida within this meaning, please insert the words "upon qualification" in lieu of a date. (Note: Pursuant to s. 607.1502(4), F.S., this office collects a civil penalty of \$1000 for each year other than the application filing year, that a foreign corporation or limited liability company transacts business in this state without authority along with the past annual report/uniform business report fees due this office.)

You failed to give us this information. We requested this in our last letter.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6913.

Diane Cushing
Corporate Specialist

Letter Number: 700A00016260

RESOLUTION OF BOARD OF DIRECTORS
(Please print or type)

I, the undersigned TRACY L. SAVERS, do hereby certify
(Name)

that this Resolution of the Board of Directors of ENERGY SOLUTIONS,
INC.
(Corporate Name)

a corporation duly organized and existing under the laws of the State of ARKANSAS

was duly adopted on 4/6/1996, 20

Be it resolved, that ENERGY SOLUTIONS, INC
(Corporate Name)

organized and existing in the State of ARKANSAS, hereby adopts the name

ENERGY SOLUTIONS USA, INC. for use in Florida.

Dated: 3/16/2000

Tracy L. Savers
Signature of either Chairman, Vice Chairman or any officer

TRACY L. SAVERS
Type or print Name

00 APR -5 PM 3:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

**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. ENERGY SOLUTIONS USA, INC.
(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 the name at present.)

2. ARKANSAS 3. 71-0791871
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 6/6/96 5. PERPETUAL
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. UPON QUALIFICATION
(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)

7. P O BOX 4252 COLUMBUS, GA 31904
(Current mailing address)

8. DISTRIBUTION OF CELLULOSE INSULATION
(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 registered agent: (P.O. Box or Mail Drop Box **NOT** acceptable)

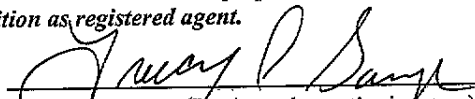
Name: TRACY L. SAYERS

Office Address: 675 NORTH 15TH AVENUE

PENSACOLA, Florida, 32501
(Zip code)

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 addresses of officers and/or directors: (Street address **ONLY** - P.O. Box **NOT** acceptable)

00 APR -9 PM 3:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

A. DIRECTORS (Street address only - P.O. Box NOT acceptable)

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS (Street address only - P.O. Box NOT acceptable)

President: JOHN D. PEZOLD

Address: 102 GRAYSTONE COURT
COLUMBUS, GA 31904

Vice President: DAVID BEAN

Address: 9 BREEZEWOOD DRIVE
MAUMELLE, AR 72113

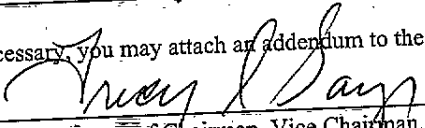
Secretary: TRACY L. SAYERS

Address: 675 NORTH 15TH AVENUE
PENSACOLA, FL 32501

Treasurer: DAVID B LEWIS

Address: 177 ALMOND RIDGE RD
FORTSON, GA 31808

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. 
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

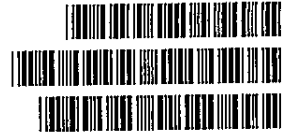
14. TRACY L. SAYERS, SECRETARY AND CHIEF OPERATING OFFICER
(Typed or printed name and capacity of person signing application)

FILED
00 APR -5 PM 3:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Sharon Priest
SECRETARY OF STATE

State of Arkansas SECRETARY OF STATE



CERTIFICATE OF GOOD STANDING OF A DOMESTIC CORPORATION

I, Sharon Priest, Secretary of State of Arkansas, and as such, keeper of the records of domestic and foreign corporations, do hereby certify that the records of this office show:

ENERGY SOLUTIONS, INC.

a corporation chartered under the laws of the State of Arkansas, filed Articles of Incorporation June 6, 1996.

I further certify that as far as the records show, this corporation is at this time chartered and in good standing, having met all the requirements governing a domestic corporation in this State.

In Testimony Whereof, I have hereunto set my hand and affixed my Official Seal. Done at my office in the City of Little Rock, Arkansas this 23rd day of February 2000.



Sharon Priest
Sharon Priest, Secretary of State
by: *L. A. Wolaridge*
L. A. Wolaridge

C-2/Rev 10-1-88