

FOOOOOO2480

To: Qualification/Tax Lien Section
Division of Corporations

SUBJECT: TNV 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:

JOSEPH TUCKER

(Name of Person)

TNV INC. D/B/A NOL-TEC SYSTEMS SOUTHEAST

(Firm/Company)

901 BLAIRHILL RD. STE 500

(Address)

CHARLOTTE, NC, 28217-4608

(City/State/Zip)

100003124391--4

02/07/00 --01004--001

*****78.75 *****78.75

W-3629

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

JOSEPH TUCKER

(Name of Person)

at 704-529-0123

(Area Code & Daytime Telephone Number)

STREET ADDRESS:

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

MAILING ADDRESS:

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

Enclosed is a check for the following amount:

☐ \$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

RECEIVED
MAY -4 10 10 22
TALLAHASSEE, FLORIDA

mt
5/4



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

February 10, 2000

JOSEPH TUCKER
901 BLAIRHILL RD., STE 500
CHARLOTTE, NC 28217-4608

SUBJECT: TNV INC.
Ref. Number: W00000003629

We have received your document for TNV INC. and your check(s) totaling \$78.75. However, the document has not been filed and is being retained in this office for the following:

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.

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) 487-6097.

Michael Mays
Document Specialist

Letter Number: 100A00006959

00 MAY -4 11:03:22
FILED

RESOLUTION OF BOARD OF DIRECTORS

(Please print or type)

I, the undersigned Joseph C. Tucker, do hereby certify
(Name)

that this Resolution of the Board of Directors of TNV Inc.

(Corporate Name)

a corporation duly organized and existing under the laws of the State of North Carolina

was duly adopted on May 2, 20 00.

Be it resolved, that TNV Inc.
(Corporate Name)

organized and existing in the State of North Carolina, hereby adopts the name

TNV, Inc. of North Carolina for use in Florida.

Dated: May 2, 2000

Joseph C. Tucker
Signature of either Chairman, Vice Chairman or any officer

Joseph C. Tucker
Type or print Name

**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. TNV 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. NORTH CAROLINA

-(State or country under the law of which it is incorporated)

3. 56-1695000

(FEI number, if applicable)

4. 04/23/90

(Date of incorporation)

5. PERPETUAL

(Duration: Year corp. will cease to exist or "perpetual")

6. 2/1/99

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

7. 901 BLAIRHILL RD. STE 500

CHARLOTTE NC 28217-4608

(Current mailing address)

8. CONTROL SYSTEMS

(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: DANIEL K. RIM

Office Address: 12088 CHEYENNE CT.

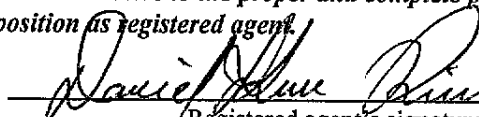
JACKSONVILLE

Florida, 32232

(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)

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: JOSEPH TUCKER

Address: 901 BLAIRHILL RD. STE 500
CHARLOTTE, NC 28217-4608

Vice President: PAUL VOGT

Address: 901 BLAIRHILL RD. STE 500
CHARLOTTE, NC 28217-4608

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

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. _____

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

STATE OF NORTH CAROLINA



Department of The
Secretary of State

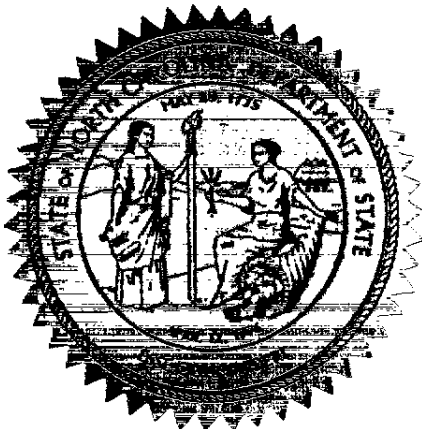
CERTIFICATION OF EXISTENCE

I, **ELAINE F. MARSHALL**, Secretary of State of the State of North Carolina, do hereby certify that

TNV, INC.

is a corporation duly created, organized, and existing under the laws of the State of North Carolina, having been incorporated on the 23rd day of April, 1990 with its period of duration being perpetual.

I FURTHER certify that the said corporation's articles of incorporation are not suspended for failure to comply with the Revenue Act of the State of North Carolina; that the said corporation is not administratively dissolved for failure to comply with the provisions of the North Carolina Business Corporation Act; that its most recent annual report required by N.C.G.S. 55-16-22 has been delivered to the Secretary of State; and that the said corporation has not filed articles of dissolution as of this date of this certificate.



IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 29th day of October, 1999.

Elaine F. Marshall

Secretary of State