F000000002915

TRANSMITTAL LETTER

(Name of corporation - must include suffix)

GENERATION EQUIPMENT & RECOVERY, INC.

Qualification/Tax Lien Section

Division of Corporations

To:

SUBJECT: _

	Dear Sir or Madam The enclosed "App "Certificate of Exis to transact business	lication by Fore	eign Corporation fo ck are submitted to	r Authorization to Transa register the above refere	ct Business in Fl nced foreign cor	orida", poration	,
ī	Please return all co	rrespondence c	oncerning this matt	er to the following:	•		
		TIMOTHY '	THRIFFILEY	- 	·		
	(Name of Person)			-05/ 0	3233 1/000 *87.50	8067 1149-013	
		PIVACH & PIVACH					*****87.50
			(Firm/C	ompany)			
		P.O. BOX	7125				
			(Ad	dress)	÷ 4°20, ₹	•	
	BELLE CHASSE, LA 70037						• • •
			(City/S	tate/Zip)			,
	TIMOTHY THE (Name of STREET ADDRESSES)	Person)	at (504 (Are	a Code & Daytime Telep MAILING ADDRE		SECRETARY ALLAHASSE	FILED DO MAY 24 PH
				Qualification/Tay I i	an Section	F. C.	PH 0
Name 5\5 Availability C	Qualification/ ax Division of Corpo 409 E. Gaines St. Tallahassee, F. 3	rations		Qualification/Tax Li Division of Corporat P.O. Box 6327 Tallahassee, FL 323	ions	STATE	D PM12: 32
Examiner	DCC Enclosed is a chec	k for the follow	ring amount:				
Updater	S70.00 Filing F	Fee = \$78.	75 Filing Fee & tificate of Status	☐ \$78.75 Filing Fee & Certified Copy		te of Status	: &
Hpdater Verifyer	DCC			•	Certified	Сору	
Acknowledge	ement DCC		•	Ĩ	120 C	(2 B)(0	2 my com
₩. P. Verify	er DCC	F		2005010		,	•
W. P. Verify		-1 - 189	7	100 30 10			



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

May 5, 2000

TIMOTHY THRIFFILEY PIVACH & PIVACH P.O. BOX 7125 BELLE CHASSE, LA 70037

SUBJECT: GENERATION EQUIPMENT & RECOVERY, INC.

Ref. Number: W00000011841

We have received your document for GENERATION EQUIPMENT & RECOVERY, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

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: 800A00025028

DO DOY 2007 M-11-1---- Flat 1- 9091

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.	GENERATION FOULPMENT & RECOVERY, 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,	LOUISIANA 3. 72-1419917 (State or country under the law of which it is incorporated) (FEI number, if applicable)		ž
	(State or country under the law of which it is incorporated) (FEI number, if applicable)		
4.	6-15-98 5. PERPETUAL (Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")		
	(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")		
6.	NONE YET		-
	(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)		
7.	820 PEARL STREET, SLIDELL, LA 70461		
	(Current mailing address)	-	÷
	- Paragraphic Control of the Control		
8.	ANY LAWFUL PURPOSE	8	
	(Purposc(s) of corporation authorized in home state or country to be carried out in state of Florida)	Š	
9.	Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)	124	FILED
	Name: JAMES MEHARG	_0	C
0	Office Address: 870 INDUSTRIAL COURT SE	24 PH 12: 32	
	Pensacola , Florida, 32505	N	
	(Zip code)		
	0. Registered agent's acceptance:		
th w	laving been named as registered agent and to accept service of process for the above stated corporation at the place designa his application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to com with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and a the obligations of my position as registered agent.	ipty	

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.

(Registered agent's signature)

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

JAMES MEHARG 820 PEARL STREET SLIDELL, LA 70461

	TORS (Street address only - P.O. Box NOT acceptable) James Meharg		
Chairman: _			
Address:	820 Pearl Street Slidell, LA 70461		
, 			
	pan:		
Address:			
		,	
Director: _		<u></u>	
Address: _			
			 .
Director: _			
Address:			
B. OFFIC	CERS (Street address only - P.O. Box NOT acceptable)		
President:	JAMES MEHARG	D S	8
Address:	820 PEARL STREET	C _R	<u> </u>
_	SLIDELL, LA 70461		2
	lent:	EG.	<u>P</u> (
		FLO	<u>ਲ</u>
Address		ALE VIEW	32
Constant	PAUL FLANAGAN		
	1903 ENGINEERS ROAD		
Address: _			
	BELLE CHASSE, LA 70037		
Treasurer:			
Address: _			
-			
NOTE:	finecessary, 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)		
	JAMES MEHARG		
14	(Typed or printed name and capacity of person signing application)		



SECRETARY OF STATE

As Pecretary of State, of the State of Louisiana, I do hereby Certify that

GENERATION EQUIPMENT & RECOVERY, INC.

A LOUISIANA corporation domiciled at BELLE CHASSE,

Filed charter and qualified to do business in this State on June 15, 1998,

I further certify that the records of this Office indicate the corporation has paid all fees due the Secretary of State, and so far as the Office of the Secretary of State is concerned is in good standing and is authorized to do business in this State.

I further certify that this Certificate is not intended to reflect the financial condition of this corporation since this information is not available from the records of this Office.

SECRETARY OF STATE

In testimony whereof, I have hereunto set my hand and caused the Seal of my Office to be affixed at the City of Baton Rouge on,

Jox. W. John

^{CI}Georetary of State

