

F000000003249

TRANSMITTAL LETTER

To: Qualification/Tax Lien Section
Division of Corporations

SUBJECT: M+J ENERGY CONTROL SYSTEMS, 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:

JAMES YOUNG

(Name of Person)

M+J ENERGY CONTROL SYSTEMS, INC

(Firm/Company)

310 CORDER ROAD

(Address)

WARNER ROBINS, GA 31087

(City/State/Zip)

000003162910--8

-03/09/00--01003--001

*****87.50 *****87.50

000003162910--8

-06/07/00--01057--008

***1300.00 ***1300.00

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

JEANIE MURRAY

(Name of Person)

at (912) 923-5406

(Area Code & Daytime Telephone Number)

| | |
|-----------------|--------------------------------|
| Name | 317100 |
| Availability | dec |
| STREET ADDRESS: | |
| Document | |
| Examiner | Qualification/Tax Lien Section |
| Updater | Division of Corporations |
| Updater | 409 E. Gaines St. |
| Verifier | Tallahassee, FL 32399 |
| Acknowledgement | DCC |
| W. P. Verifier | DCC |

FL019-9/299 C.T. System Online

MAILING ADDRESS:

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

TAX

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G. COPY

TOTAL

N. BANK

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RECEIVING FEE

Certified Copy

☐ \$78.75 Filing Fee &
Certificate of Status

☐ \$78.75 Filing Fee &
Certified Copy

☒

SALES/RECEIVING FEE

RECEIVING FEE

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15 pages

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JACQUES M. LEVY & Co., LLP

CERTIFIED PUBLIC ACCOUNTANTS

1120 AVENUE OF THE AMERICAS

NEW YORK, N.Y. 10036

SOL GREENBAUM
SIDNEY H. GREENE
JERALD B. GREENBERG
DAVID M. COHEN
MORTON OFSIE
NORMAN PEARLMAN
JOHN K. APRILAKIS
—
HARVEY S. SCHWARTZ
BENJAMIN KARPEN

TELEPHONE
(212) 719-3200
FAX
(212) 819-9353

April 11, 2000

Ms. Diane Cushing, Corporate Specialist
Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: M&J Energy Control Systems, Inc.
Federal Taxpayer Identification Number: 11-2497399
Florida Registration

VIA CERTIFIED MAIL

Dear Ms. Cushing:

The State of Florida Department of Revenue has determined that M&J Energy Control Systems, Inc. (M&J) has nexus with the State of Florida and is required to collect and remit tax directly to the Florida Department of Revenue.

Please be aware that M&J wishes to comply with the State of Florida in all matters that pertain to its responsibility as a company doing business in your state.

Until the taxpayer was notified that there was nexus between it and the state of Florida, M&J had no idea that there was any requirement to register in your state. As soon and it was made aware of its responsibility to register, it took all steps necessary to comply.

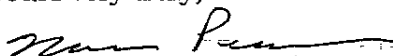
For example, the taxpayer has reviewed its records with regard to work performed in Florida from January 1997 through December 1999 and has remitted \$1,171.05 in sales taxes. Please refer to the enclosed copy of our letter to the Florida Department of Revenue.

We respectfully ask that the annual report/uniform business report and penalty fees of \$2,300 be abated in light of our immediate attempts to comply with your registration and tax guidelines upon being notified of our responsibility.

Please allow me to convey, in advance, our deepest appreciation.

Enclosed please find M&J's New York certificate of existence.

Yours very truly,



Norman Pearlman

1. Reason for filing this Application:

DR-1
R. 05/98
Page 1



A. This application is for (check all that apply):

- ☒ Sales Tax (collecting tax on sales of merchandise/services) — Fee is \$5.00
☐ Use Tax (only paying tax on items purchased tax-free that are used in your business) — No fee
☐ Gross Receipts Tax (Telecommunications and Utilities) — No fee
☐ Documentary Stamp Tax — No fee
☐ Dry-cleaning Sales Tax on Gross Receipts — Fee is \$30.00

B. This is for a (check one):

- ☐ New business — If so, is this your first time doing business in Florida? ☐ Yes ☐ No
☐ Additional location
☐ Change of:

☐ Ownership ☐ Legal Entity or ☐ County Location; as of (enter date: MM-DD-YYYY)

List old Sales and Use Tax Registration Number

C. If this is a seasonal business, list your active business months.

Opening month: Closing month:

2. Beginning of Business Activity:

Month Day Year
 Date this business location became or will become liable to collect and remit Florida sales and use tax. If you have been in business for more than 30 days prior to registering, visit your nearest Department of Revenue service center immediately to settle your tax liability. Do not use incorporation date unless that is the date your business became liable for the tax. For rental property, report the date the location became taxable as a result of the tenant occupying the unit.

BUSINESS INFORMATION

| | | |
|--|--|--|
| 3. Business Name: business, trade, or fictitious (d/b/a) name. M+J ENERGY CONTROL SYSTEMS, INC. | | Business Telephone: 1-912-923-5401 |
| 4. Owner Name: legal name of individual, principal partner, or corporation. SEAN S. JONES | | Owner Telephone: 1-912-923-5504 |
| 5. Business Location: complete physical address of business or real property. Home-based businesses and flea market/craft show vendors must use their home address. A post office box or rural route number is not acceptable. 310 CORDER ROAD | | FAX #: 1-912-923-5504 |
| City/State/ZIP: WARNER ROBINS, GA 31088 | | |
| County: HOUSTON | Is business located within city limits? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | |
| 6. Mail to the Attention of: JAMES YOUNG | | Agent's Telephone: |
| Address: address where you want us to mail your tax forms and correspondence. If an agent will be receiving the rent, place the agent's business address in this section. SAME AS ABOVE | | |
| City/State/ZIP: | | County: |
| Would you like to receive correspondence via e-mail? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | E-mail address: | Website URL: |

7. If you have a Consolidated Sales Tax Number and want to link this business location, please complete the following:
 (Does not apply to documentary stamp tax applicants)

80 (Consolidated Sales Tax Number)

Consolidated registration name on record with the Florida Department of Revenue.

If you want to obtain a new consolidated number contact the Department and request Form DR-1CON.

8. Identification Number If a Federal Employer Identification Number is not required for the entity, the Social Security Number of the owner will be accepted. This number is required for purposes of identification in order to properly administer the tax laws of Florida. Pursuant to federal law, this number will not be disclosed to any other party.

FEIN **112497399** SSN **111-11-1111**

If you do not have an FEIN, is it ☐ applied for ☐ not required? To apply for an FEIN, call the IRS at 1-800-829-1040.

FOR DOR OFFICE USE ONLY

MO QU SA AN SE SIC Kind Code Sales and Use Tax # DOR Office Code

BUSINESS INFORMATION CONTINUED

9a. Type of Organization - Check one box to enter the type of business. Listed are the definitions of business types:

Corporation - A legal entity created by or under the authority of the laws of a state.

Partnership - Two or more persons or entities that have entered into a voluntary contract.

Trust - A legal entity created by a grantor for the benefit of designated beneficiaries under the laws of the state and the valid trust instrument.

Sole Proprietorship - An individual or individual and spouse.

Professional Association - Any group of professional people organized to practice their profession together.

Other - Any other type of business entity. Please write in (e.g., government, civic organization).

☒ Corporation ☐ Partnership ☐ Trust ☐ Sole Proprietorship ☐ Professional Association

☐ Other (explain) "S" Corporation

9b. If corporation or partnership, provide fiscal year ending date 07 / 30
M M D D

9c. Are you an entity required to be registered with the Division of Corporations of the Florida Department of State? Yes ☐ No ☐

If yes, provide your document/registration number: _____

If your corporation is not registered, you must attach a copy of your Articles of Incorporation as filed with the regulating authority in your state. Contact the Division of Corporations at 850-488-9000 for Florida corporation information.

NATURE OF BUSINESS ACTIVITY

10. Describe your major (more than 50%) business activities that will be subject to tax (please be specific): INSTALLATION
OF COMPUTER MONITORING DEVICES

NOTE: Documentary stamp tax applicants should skip to question 40. All others must continue with question 11.

11. What are the products you purchase for resale to your customers or to be included in a finished product you manufacture? _____

COMPUTER COMPONENTS

12. What are your estimated annual receipts from taxable sales and/or rentals? IN FLORIDA

(check one) ☐ \$1,700 or less ☐ between \$8,000 and \$16,000 ☐ \$800,000 - up
☐ between \$1,700 and \$8,000 ☐ between \$16,000 and \$800,000 ☐ unable to estimate

13. Do you sell merchandise? ----- Yes ☒ No ☐

Wholesale (selling for resale purposes)? ----- Yes ☐ No ☒

Retail (selling to consumers)? ----- Yes ☒ No ☐

14. Do you rent living or sleeping accommodations for 6 months or less to individuals or businesses? ----- Yes ☐ No ☒

(This includes hotels, motels, time-shares, condominiums, apartments, and trailer parks.)

15. Do you rent commercial real property to individuals or businesses? ----- Yes ☐ No ☒

16. Do you charge admission or membership fees? ----- Yes ☐ No ☒

17. Do you rent equipment or other tangible personal property to individuals or businesses? ----- Yes ☐ No ☒

18. Do you provide any of the following services?

Pest control for nonresidential buildings ----- Yes ☐ No ☒

Cleaning for nonresidential buildings ----- Yes ☐ No ☒

Detective ----- Yes ☐ No ☒

Protection ----- Yes ☐ No ☒

Security alarm system monitoring ----- Yes ☐ No ☒

AMUSEMENT/VENDING

19. Do you generate sales and remove receipts from amusement or vending machines? ----- Yes ☐ No ☒

If yes, answer the questions in this block.

Food/Beverage vending machines? ----- Yes ☐ No ☐

Vending machines for other products? ----- Yes ☐ No ☐

20. Do you sell food or beverages wholesale to vending machine operators? ----- Yes ☐ No ☐

21a. Are coin-operated amusement machines being operated at your business location? ----- Yes ☐ No ☐

21b. Do you have a written agreement that requires someone else to obtain

Amusement Machines Certificates for all of the machines? ----- Yes ☐ No ☐

22a. Do you have a written agreement that specifies who is responsible for obtaining Amusement Machines Certificates? ----- Yes ☐ No ☐

22b. Do you have a written agreement that requires you to obtain

Amusement Machines Certificates for any of the machines? ----- Yes ☐ No ☐

You must complete an Application for Amusement Machines Certificate (Form DR-18) if:

- you answered NO to Question 21b and have amusement machines on your business location, or
- you answered YES to Question 22b and lease amusement machines.

SOLID WASTE

23. Do you sell tires or batteries or rent/lease motor vehicles to others? ----- Yes ☐ No ☒
If yes, answer the questions in this block.
24. Do you make retail sales of new tires for motorized vehicles (either separately or as a part of a vehicle)? ----- Yes ☐ No ☐
25. Do you make retail sales of new, used, or remanufactured lead-acid batteries sold separately or as a component part of another product? ----- Yes ☐ No ☐
26. Are you in the business of renting or leasing motor vehicles that transport less than nine passengers to individuals or businesses? ----- Yes ☐ No ☐

DRY CLEANING

27. Do you own or operate a dry-cleaning plant in Florida? ----- Yes ☐ No ☒
If yes, answer the questions in this block.
28. Do you use perchloroethylene in the dry-cleaning process? ----- Yes ☐ No ☐
If you use perchloroethylene, enclose \$30 dry-cleaning registration fee.
29. Do you produce or import perchloroethylene? ----- Yes ☐ No ☐
If yes, complete an Application for Florida License to Produce or Import Taxable Pollutants (Form DR-166).

MOTOR FUEL

30. Do you sell any type of fuel or use off-road diesel fuel? ----- Yes ☐ No ☒
If yes, answer the questions in this block.
31. Do you (or will you) make retail sales of gasoline, diesel fuel, or aviation fuel at posted retail prices? ----- Yes ☐ No ☐
If yes to # 31, do you expect the sales of diesel fuel (as measured in gallons) to exceed the sales of gasoline? ----- Yes ☐ No ☐
If yes to # 31, does this business exist as a marina? ----- Yes ☐ No ☐
If yes to # 31, what is your seven (7) digit Florida Department of Environmental Protection Facility Registration Number for this location? _____
32. Do you use diesel fuel for non-highway purposes? ----- Yes ☐ No ☐

CONTRACTORS

33. Are you a contractor who improves real property? ----- Yes ☐ No ☒
If yes, answer the questions in this block.
 Do you most frequently operate as a ☐ prime contractor ☐ subcontractor? List the type of construction you perform (e.g., building, painting, electrical). _____
34. Do you operate under formal written contracts? ----- Yes ☐ No ☐
If yes, what type of contracts do you operate under? ☐ Lump Sum ☐ Cost Plus ☐ Fixed Fee and/or ☐ Other
If other, please explain. _____
35. Do you purchase any materials or supplies from vendors located outside of Florida? ----- Yes ☐ No ☐
36. Does your company have a current occupational license in any Florida county? ----- Yes ☐ No ☐
If yes, please list all the counties in which you are licensed and the corresponding license numbers. _____

37. Do you fabricate/manufacture any building components at a location other than contract sites? ----- Yes ☐ No ☐

TELECOMMUNICATION/ENERGY

38. Do you provide telecommunication services, electrical power, or gas? ----- Yes ☐ No ☒
If yes, answer the questions in this block.
Do you sell:
- | | | |
|--|------------------------------|-----------------------------|
| a. Electrical power | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| b. Natural or manufactured gas | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| c. Pay phone service | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| d. 2-way cable television service | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| e. Telex, telegram, teletype service | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| f. Cellular or pagers service | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| g. Long distance (inter-exchange service) | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| h. Shared tenant utility service | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| i. Telephone service (local exchange) | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| j. Alternative access vendor service | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| k. Other telecommunication services (By-Pass provider, etc.) | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
- Describe** _____
39. Do you provide billing services to telecommunication service providers? ----- Yes ☐ No ☐

DOCUMENTARY STAMPS

40. Does your business include sales finalized by written agreements that do not require recording by the Clerk of the Court, but do require documentary stamps to be affixed? ----- Yes ☐ No ☒
- If yes, answer the questions in this block.
41. Is this application being completed to register your first location to collect documentary stamp tax? ----- Yes ☐ No ☐
- If no, and this application is for additional locations, please list name and address of each additional location. _____
42. Do you anticipate five or more taxable transactions per month? ----- Yes ☐ No ☐
43. Do you anticipate your average monthly tax remittance to be less than \$80 a month? ----- Yes ☐ No ☐

44. **Owner, Partner, Officer Information** List the primary owner or corporate officer first. Enter the name, Social Security number, home address, and telephone number of the owners, partners, or corporate officers. This application will not be processed without this information.

| Name and Title | Social Security Number | Home Address | Telephone Number |
|-------------------|------------------------|-------------------------|------------------|
| JAMES J. YOUNG JR | 209 -28-2715 | 310 CORDER ROAD | - - |
| | - - | WARNER ROBINS, GA 30087 | - - |
| | - - | | - - |
| | - - | | - - |

- 45. Business or Personal Banking Information:**

CBVT

000-451-329-2

☐ Personal Account
☐ Business Account

Bank Name

Account Number (where tax will be deposited)

Bank Name PO-Box 2107
Bank Street Address

WARNER Robins, ^{Acco}
City

64
State

31099

218

46. Is your business location rented? _____ Yes ☐ No ☒
If yes, provide the following information:

If yes, provide the following information:

Landlord or Owner's Name:

Address:

City/State/ZIP:

Telephone Number:

Applicant Signature—This Application Cannot Be Processed If Not Signed by the Applicant

Under penalties of perjury, I declare that I have read the foregoing application and that the facts stated in it are true.

under penalties of perjury, declare that, na

James J. Young Jr

Signature of the business or real property ow

12/6/99

Date application signed

JAMES J. YOUNG JR
Print or type the name signed above

PRESIDENT

Title of signatory

Please note that any person (including employees, corporate directors, corporate officers, etc.) who is required to collect, truthfully account for, and pay any sales taxes and willfully fails to do so shall be liable for penalties under the provisions of §213.29, Florida Statutes (F.S.). All information provided by the applicant is confidential as provided in §213.053, F.S., and is not subject to Florida Public Records Law (§119.07, F.S.).

NOTE: After signing, mail completed application and applicable registration fee (**DO NOT SEND CASH**) to **FLORIDA DEPARTMENT OF REVENUE, 5050 W TENNESSEE ST, TALLAHASSEE, FL 32399-0100;** or mail or deliver to any Department of Revenue service center.

FOR DOR OFFICE USE ONLY

Documentary Stamp Tax

[illegible]

☐ MO ☐ QU ☐ SA

Gross Receipts Tax

[illegible]

RECEIVED

APR 20 2000

Office of General Counsel
Department of State

TO: Gerry York, General Counsel's Office
FROM: Brenda L. Tadlock, Registration Section
DATE: April 18, 2000
SUBJECT: M&J ENERGY CONTROL SYSTEMS, INC.
REFERENCE: W00000007169

The attached documents and correspondence are being forwarded to you for appropriate handling.

Please note the attached documents appear to meet the filing requirements stipulated in Chapter 607, Florida Statutes, with the exception of any penalty or annual report fees that may be due this office **and the required original certificate of existence.**

Should you have any further questions concerning this matter, please do not hesitate to get in touch.

/blt

Attachments



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
OFFICE OF THE GENERAL COUNSEL

F A C S I M I L E T R A N S M I T T A L

TO FAX NUMBER: (212) 819-9353

Please deliver the following pages to:

NAME: Mr. Norman Pearlman

COMPANY: Jacques M. Levy & Co., LLP

CITY/STATE: New York, New York

SENDER: Gerard T. York, Esq.,
Assistant General Counsel

DATE/TIME: 04/20/00 10:59 AM

NUMBER OF PAGES (including transmittal sheet):2

FROM FAX: 850/922-5763 (Suncom 292-5763)

COMMENTS: This communication is in response to your letter regarding annual report fees and statutory penalties which would be assessed against M & J Energy Control Systems, Inc., under section 607.1502(4), Florida Statutes.

An application filed with the Division of Corporations indicates M & J Energy Control Systems, Inc., has transacted business in Florida since 1998. Accordingly, an amount of \$2300.00 is due, reflecting annual report fees of \$300.00 and statutory penalties of \$2000.00. We would, however, offer to settle the issue of annual report fees and foreign non-qualified penalties from M & J Energy Control Systems, Inc.,

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Pearlman sending
che dr*

for the sum of \$1300.00, reflecting annual report fees from 1998 of \$300.00 and penalties from 1998 of \$1000.00 assessed at the statutory minimum of \$500.00 per year. This offer remains in effect until May 31, 2000.

Upon completion of the application and receipt of a check in that amount payable to the Department of State, Division of Corporations, I will instruct the Division of Corporations to issue M & J Energy Control Systems, Inc., a Certificate of Authority to transact business in Florida. Please be aware that an original certificate of existence is required to complete the application. Section 607.1503(2), Florida Statutes. Please mail the check to this attorney at: Office of General Counsel, LL-10, The Capitol, Tallahassee, Florida 32399-0250.

Please do not hesitate to contact me should you have any questions.

If there are any problems in receiving this transmission, call Cara at 850/414-5536 or Suncom 994-5536.

LL-10 • THE CAPITOL • TALLAHASSEE, FLORIDA 32399-0250



Department of State

Memorandum Office of the General Counsel

TO: File

FROM: Gerard York, Assistant General Counsel

DATE: June 2, 2000

RE: M. & J. Energy Systems, Inc.

Based on my review of the file and the payments received from the corporation, it is my recommendation that this file be closed. Corporation has paid outstanding report fees from 1998 of \$300.00 and foreign non-qualified penalties of \$ 1000.00 assessed at the statutory minimum of \$500.00 per year and wishes to be qualified to do business in the State of Florida. Accordingly, it is recommended corporation be issued a certificate of authority.

/gty

JACQUES M. LEVY & Co., LLP

CERTIFIED PUBLIC ACCOUNTANTS

1120 AVENUE OF THE AMERICAS

NEW YORK, N.Y. 10036

SOL GREENBAUM
SIDNEY H. GREENE
JERALD B. GREENBERG
DAVID M. COHEN
MORTON OFSIE
NORMAN PEARLMAN
JOHN K. APRILAKIS
HARVEY S. SCHWARTZ
BENJAMIN KARPEN

TELEPHONE
(212) 719-3200
FAX
(212) 819-9353

May 23, 2000

Ms. Diane Cushing, Corporate Specialist
Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: M&J Energy Control Systems, Inc.
Federal Taxpayer Identification Number: 11-2497399
Florida Registration

VIA CERTIFIED MAIL

Dear Ms. Cushing:

We've received notice from your attorney that the State of Florida would accept \$1,300 in settlement of payment for annual report fees.

Enclosed is a check for \$1,300 and an **original** certificate of existence from the State of New York.

I understand that this will enable the State of Florida to process all applications to do business that have been filed by the taxpayer.

Should you have any questions, please do not hesitate to call.

Yours very truly,



Norman Pearlman
CC: M&J Energy Control Systems, Inc.



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

March 17, 2000

JAMES YOUNG
M&J ENERGY CONTROL SYSTEMS, INC.
310 CORDER ROAD
WARNER ROBINS, GA 31082

SUBJECT: M&J ENERGY CONTROL SYSTEMS, INC.
Ref. Number: W00000007169

We have received your document for M&J ENERGY CONTROL SYSTEMS, INC. and your check(s) totaling \$87.50. However, the document has not been filed and is being retained in this office for the following:

Pursuant to section 607.1502(4), 617.1502(4) or 608.502(4), Florida Statutes, this office collects a civil penalty of \$1000 for each year this entity transacted business or conducted its affairs in Florida prior to qualification and the appropriate annual report fees that would have been due this office had the entity qualified the year it began operations in this state. The amount due this office to cover both annual report/uniform business report and penalty fees is \$2,300.00.

A certificate of existence, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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: 500A00014808

**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. M+J ENERGY CONTROL SYSTEMS, 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. NEW YORK 3. 11-2497399
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. MAY 3, 1979 5. PERPETUAL
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. 1998
(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
7. 310 CORDER ROAD
WARNER ROBINS, GA 31088
(Current mailing address)
8. INSTALLATION OF MONITORING EQUIPMENT FOR REFRIGERATION SYSTEM
(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: C T Corporation System

Office Address: 1200 South Pine Island Road

Plantation, Florida, 33324
(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.

X Dale W. Morris

(Registered agent's signature)

DALE W. MORRIS
ASSISTANT VICE PRESIDENT

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: JAMES YOUNG

Address: 310 CORDER ROAD

WARNER ROBINS, GA 31088

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

FILED
00 JUN -7 PM 3:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

President: JAMES YOUNG

Address: 310 CORDER ROAD

WARNER ROBINS, GA

Vice President: _____

Address: _____

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

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

13. X

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

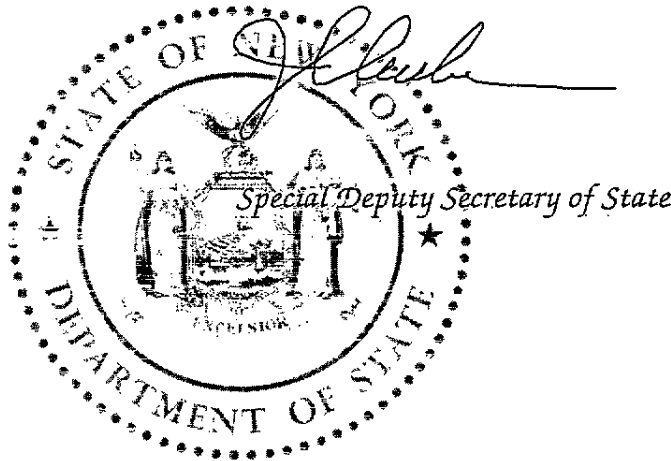
14. JAMES YOUNG - OFFICER

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

State of New York | **ss:**
Department of State

I hereby certify, that the Certificate of Incorporation of M & J ENERGY CONTROL SYSTEMS, INC. was filed on 05/03/1979, with perpetual duration, and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is a subsisting corporation.

*Witness my hand and the official seal
of the Department of State at the City
of Albany, this 01st day of May
two thousand.*



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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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FILED