To: Qualification/Tax Lien Section  Division of Corporations
SUBJECT: Doleac Electric Company, 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:
Tara S. Nettles -06/29/0001081007  (Name of Person) ************************************
(Name of Person)
Doleac Electric Company, Inc.
(Firm/Company)
1120 Finlo Dr., P.O. Box 1936
(Address)
Hattiesburg, MS 39403
(City/State/Zip)
Should you need to call someone concerning this matter, please call:  Tara S. Nettles at (601 ) 544-2052
(Name of Person) (Area Code & Daytime Telephone Number)
(Name of Forson)
STREET ADDRESS:  MAILING ADDRESS:  7/4
Qualification/Tax Lien Section  Division of Corporations  409 E. Gaines St.  Tallahassee, FL 32399  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 & □ \$78.75 Filing Fee & □ \$78.75 Filing Fee & □ \$87.50 Filing Fee,  Certificate of Status Certified Copy  Certified Copy  Certified Copy

## CATION 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.	Doleac Electric Company, 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.)							
	natural person of partnership if not so contained in the name at present.)							
2.	Mississippi 33							
	(State or country under the law of which it is incorporated) (FEI number, if applicable)							
4.	February 6, 1980 5. 99 years							
	(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")							
6.	N/A							
	(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)							
7.								
1.	P.O. Box 1936							
	Hattiesburg, MS 39403							
	(Current mailing address)							
8.	Electrical Contracting							
	(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: DAWR SHARE							
Of	fice Address: 529 Windrase Cincle							
	Rensacola F/, Florida, 33507							
	(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. DIREC	TORS (Street address only - P.O. Box NOT acceptable)					
Chairman:						
Address:		·				ست
			<b>.</b>		in comme	·
Vice Chairn	dan:					
Director: _	Donald L. Doleac					,
	207 Tidewater Road					
	Hattiesburg, MS 39402					
Director: _	John L. Doleac					
Address:	472 Sandy Run Road		. <u>.</u>	<u>-</u>	1 <del></del>	<u>-</u>
	Hattiaghum MC 20402					
3. OFFIC	ERS (Street address only - P.O. Box NOT acceptable)					, - <del>(all)</del>
resident: _	Donald L. Doleac	· -,				
Address:	207 Tidewater Road		<b>三</b>	00	73. 1	
_	Hattiesburg, MS 39402				* 1	
/ice Preside	ent: John L. Doleac	<u> </u>	in the second se	29		
Address:	472 Sandy Run Road	*	د د سری د همستم و امو در دو	273 	faces	
	Hattiesburg, MS 39402		1 - 7 See - 1 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2	1.3 1.3		
ecretary: _	Tara S. Nettles					4.5
ddress:	616 Woodland Hills Dr.					
·	Hattiesburg, MS 39402				:	
reasurer: _	Tara S. Nettles					<u> </u>
ddress:	616 Woodland Hills Dr.					•
	Hattiesburg, MS 39402					
OTE: If	necessary, you may attach an addendum to the application listing additional	officers and/o	or directors.			
3.	Ane 1. H					
	(Signature of Chairman, Vice Chairman, or any officer listed in number	r 12 of the ap	pplication)			
4	Donald L. Doleac, President  (Typed or printed name and capacity of person signir	<u> </u>				

## 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 06,1980 the state of Mississippi issued a Charter/Certificate of Authority to:

DOLEAC ELECTRIC COMPANY, 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.

STATE OF STA

Given under my hand and seal of office June 27,2000

ERIC CLARK, Secretary of State