F01000005828

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: HOWARD INDUSTRIES, 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.

100004668911--2
-11/06/01--01050--003
*****87.50 *****87.50

Please return all correspondence concerning this matter to the following:

WAYLAND JOHNSON
(Name of Person)

HOWARD INDUSTRIES, INC.
(Firm/Company)

3225 PENDORF RD. P.O. BOX 1588
(Address)

LAUREL, MS 39441
(City/State and Zip code)

For further information concerning this matter, please call:

WAYLAND JOHNSON at (601) 422-1476
(Name of Person) (Area Code & Daytime Telephone Number)

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TALLAHASSEE, FLORIDA

STREET ADDRESS:
Registration Section
Division of Corporations
409 E. Gaines St.
Tallahassee, FL 32399

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

11/8

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

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. HOWARD INDUSTRIES, 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. MISSISSIPPI
(State or country under the law of which it is incorporated)

3. 64-0466143
(FEI number, if applicable)

4. 01/15/68
(Date of incorporation)

5. "99 YEARS"
(Duration: Year corp. will cease to exist or "perpetual")

6. UPON QUALIFICATION
(Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification.")
(SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)

7. 3225 PENDORF RD, LAUREL, MS 39441
(Principal office address)

P.O. BOX 1588, LAUREL, MS 39441
(Current mailing address)

8. SELLING &/OR SERVICE OF COMPUTER EQUIPMENT &/OR OTHER ELECTRICAL EQUIPMENT
(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 SO. PINE ISLAND RD.

PLANTATION, Florida 33324
(City) (Zip code)

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TALLAHASSEE, FLORIDA

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.

(SEE ATTACHED LETTER)

(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 business addresses of officers and/or directors:**

A. DIRECTORS **(SEE ATTACHED)**

Chairman: _____

Address: _____

_____

Vice Chairman: _____

Address: _____

_____

Director: _____

Address: _____

_____

Director: _____

Address: _____

_____

B. OFFICERS **(SEE ATTACHED)**

President: _____

Address: _____

_____

Vice President: _____

Address: _____

_____

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

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

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

14. STEVEN L. HOWARD, CHIEF FINANCIAL OFFICER/VP OF FINANCE
(Typed or printed name and capacity of person signing application)

CERTIFICATE OF DESIGNATION
OF
REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 608.415 or 608.507, Florida Statutes, the undersigned corporation authorized under the laws of the state of Florida, submits the following statement in designating the registered agent/registered office, in the state of Florida.

1. The name of the corporation is: HOWARD INDUSTRIES, INC.

2. The name and address of the registered agent and office is C T Corporation System, 1200 South Pine Island Road, Plantation, Florida 33324

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

M S Green, Assistant Secretary

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TALLAHASSEE, FLORIDA

HOWARD INDUSTRIES, INC.

P. O. Box 1588, Laurel, MS 39441 Telephone: (601) 425-3151 Facsimile: (601) 649-8090

HOWARD INDUSTRIES, INC.
CORPORATE OFFICERS/DIRECTORS

NAME	TITLE	BUSINESS ADDRESS	CITY ST	ZIP CODE
HOWARD, BILLY W SR	CHAIRMAN/CEO	P.O. BOX 1588	LAUREL, MS	39441
HOWARD, LINDA T	DIRECTOR/PRESIDENT	P.O. BOX 1588	LAUREL, MS	39441
BURTON, WILLIAM S.	DIRECTOR	16 NORTHGATE DR	LAUREL, MS	39441
GILCHRIST, STEWART J.	DIRECTOR/SECRETARY	P.O. BOX 106	LAUREL, MS	39441
HOWARD, STEVEN L	VP-FINANCE, CFO	P.O. BOX 1588	LAUREL, MS	39441
HOWARD, BILLY W JR	PRESIDENT - BALLAST DIVISION	P.O. BOX 1588	LAUREL, MS	39441
HOWARD,MICHAEL M.	PRESIDENT - TRANSFORMER DIV.	P.O. BOX 1588	LAUREL, MS	39441
MCCOY, CYNDI A	PRESIDENT - BUSINESS DEV.	P.O. BOX 1588	LAUREL, MS	39441
ARCHER, WILLIAM C.	VP-HOWARD COMPUTER PURCH	P.O. BOX 1590	LAUREL, MS	39441
BRYANT, GREGORY A	VP- RESEARCH & DEV.	P.O. BOX 1588	LAUREL, MS	39441
CAUSEY, WAYNE H.	VP-BALLAST DIV - ELECTRONIC	P.O. BOX 1590	LAUREL, MS	39441
CAVER, MORRIS M JR	VP- TRANSFORMER PURCHASING	P.O. BOX 1588	LAUREL, MS	39441
DELK, JACK E.	VP-SINGLE PH PAD DIVISION	P.O. BOX 1588	LAUREL, MS	39441
DODDS, MICHAEL P.	VP-BALLAST MARKETING	P.O. BOX 1590	LAUREL, MS	39441
HOBSON, PAUL S	VP-DATA PROCESSING	P.O. BOX 1588	LAUREL, MS	39441
HODGE, GERALD	VP-SINGLE PPH POLE DIVISION	P.O. BOX 1588	LAUREL, MS	39441
LEWIS, DANNY W.	VP-HC DIVISION	P.O. BOX 1590	LAUREL, MS	39441
PERKINS, DAVID G	VP-HC MARKETING	P.O. BOX 1590	LAUREL, MS	39441
SAGET, DONALD D	VP-THREE PH PAD DIVISION	P.O. BOX 1588	LAUREL, MS	39441
SUMRALL, ROBERT SCOTT	VP-TRANSFORMER MARKETING	P.O. BOX 1588	LAUREL, MS	39441
THORNTON, MICHAEL A	VP-HC ENGINEERING	P.O. BOX 1590	LAUREL, MS	39441
WILLIAMS, JERRY F.	VP-BALLAST MAGNETIC DIVISION	P.O. BOX 1590	LAUREL, MS	39441

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TALLAHASSEE, FLORIDA

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 January 15,1968 the state of Mississippi issued a Charter/Certificate of Authority to:

HOWARD INDUSTRIES, 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 has authority to transact business in Mississippi.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Given under my hand
and seal of office
October 24,2001

Eric Clark

ERIC CLARK,
Secretary of State