Fod QQQQ 3607

TO: Registration Section Division of Corporations
SUBJECT: Coastal Forklift and Hydraulics, Inc. 3
(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 E. Folker
(Name of Person)
Coastal Forklift and Hydraulis Inc. ODOLOGE 130590-
PO Box 158 *****78.75 *****78.75
(Address)
Ludowici, GA 31316
(City/State and Zip code)
For further information concerning this matter, please call: $69-960$
James E. Folker at (912) 545-9920
(Name of Person) (Area Code & Daytime Telephone Number)
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
Enclosed is a check for the following amount:
□ \$70.00 Filing Fee \$ □ \$78.75 Filing Fee & □ \$78.75 Filing Fee & □ \$87.50 Filing Fee, Certificate of Status Certified Copy Certified Copy



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

July 2, 2002

JAMES E. FOLKER P.O. BOX 158 LUDOWICI, GA 31316

SUBJECT: COASTAL FORKLIFT AND HYDRAULICS, INC.

Ref. Number: W02000019160

FILED

OZ JUL 16 MI ID: 03

SCURLINGER FLORIDA

We have received your document for COASTAL FORKLIFT AND HYDRAULICS, 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:

A certificate of existence or a certificate of good standing, 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) 245-6094.

Agnes Lunt Document Specialist

Letter Number: 702A00041795

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

L	•
IN COMPLIANCI REGISTER A FO	E WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.
· Const	al Forklift and Hydraulies, Inc.
(Name of corpor	ration: must include the word "INCORPORATED". "COMPANY", "CORPORATION" or
words or abbrevi	r partnership if not so contained in the name at present.)
\wedge	
2. <u>Georg</u>	under the law of which it is incorporated) 3. 58-2500307 FEI number, if applicable)
4. <u>12-3</u>	6-1999 5. Perpetual Ouration: Year corp. will cease to exist or "perpetual"
6. <u>(0-01-0</u>	acted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification.")
(Date first transa	(SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
- 381	1 Macon Street, Ludowici GA 31316
7	(Principal office address)
PD	BOX 158 Ludowici, GA 31314
	(Current mailing address)
~ .	
8. <u>Sales</u>	(s) of corporation authorized in home state or country to be carried out in state of Florida)
_	
9. Name and st	reet address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)
Name:	Frank Mariani
Office Address:	360 12th Street
Office Address.	
	AHantic Beach, Florida 32233 (Zip code)
	(City)
10. Registered	agent's acceptance: amed as registered agent and to accept service of process for the above stated corporation at the place
	is analisation. I harabu accout the annountment as revisiental avelle and avice to account our currents
full or agree to	ns application, I hereby accept the appointment as registered agent and complete performance of my comply with the provisions of all statutes relative to the proper and complete performance of my familiar with and accept the obligations of my position as registered agent.
duties, and I an	a tammar with and accept the obligations of my position as regulated a agent
	$\mathcal{O}_{\mathcal{A}}$ \wedge \wedge \wedge
	Fronk U. W arrive (Registered agent's signature)
	(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

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.

A. DIRECT	and business addresses of officers and/or directors:
	,
Vice Chairman	1:
Address:	TALL 02
	
Director:	SSELF ED
Address:	<u> </u>
	RATE O3
Director:	
Address:	
Address:	ames E Folker It a Box 168 udowici, GA 31316
Vice President	•
Address:	
•	inda C. Folker
	t.2 Box 14B Ludowici, EA 31316
	Ricky Mallard
Address:	300 Mallard Pye Road Odum GA 31555
NOTE: If m	ecessary, you may attach an addendum to the application listing additional officers and/or directors.
13.	mar & Jacher
T	(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)
14	OMES E. FUlker- President (Typed or printed name and capacity of person signing application)

Secretary of State

Corporations Division 315 West Tower #2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530 CONTROL NUMBER : K952945
DATE INC/AUTH/FILED: 12/28/1999
JURISDICTION : GEORGIA
PRINT DATE : 06/14/2002

FORM NUMBER : 211

COASTAL FORKLIFT AND HYDRAULICS, INC.

JAMES E FOLKER
RT 2 BOX 16B

LUDOWICI, GA 31316

CERTIFICATE OF EXISTENCE

FILEU DZ JUL 16 MM ID: 03 SKURLIJASSEE, FLORIDI

I, Cathy Cox, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that as of the above print date

COASTAL FORKLIFT AND HYDRAULICS, INC.

is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated.

Said entity was formed in the jurisdiction stated above or was authorized to transact business in Georgia on the above date and has not filed articles of dissolution, certificate of cancellation or any other similar document with the Office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the print date above. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This information is electronically transmitted, issued and certified in accordance with the Georgia Electronic Records and Signatures Act and Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

20020614123907765



Cathy Cox Secretary of State