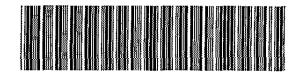
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(Re	equestor's Name)			
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TRANSMITTAL LETTER

FO: Registration Sec Division of Cor			
SUBJECT: Ma	ple Grove Electric I	Incorporated	
		ation - must include suffix)	
Dear Sir or Madam:			
	ion by Foreign Corporation e", and check are submitted lorida.		
Please return all corresp	ondence concerning this ma	atter to the following:	
Thomas W.			
, -	(Name	of Person)	
Maple Grov	e Electric Incorpora	ated	
		(Company)	
242 Stenci	1 Lane		DIVISE 03
***	(A	.ddress)	A OR
Mount Airy	, NC 27030	·	
*	`	ate and Zip code)	PREC
		• '	I gar
For further information	concerning this matter, plea	se call:	DIVISION OF CORPORATIONS 03 MAY 16 PM 1:37
Thomas W. Ho	ocraft at (336	5) 786-2614	<u> </u>
(Name of Perso	on) (Ar	ea Code & Daytime Teleph	one Number)
STREET ADDRESS: Registration Section Division of Corporation 409 E. Gaines St. Tallahassee, FL 32399	s	MAILING ADDRES Registration Section Division of Corporation P.O. Box 6327 Tallahassee, FL 3231	ons
Enclosed is a check for	the following amount:		_
□ \$70.00 Filing Fee	S78.75 Filing Fee & Certificate of Status	☐ \$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certificate of Status &

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.	Maple G	rove Electr	ic, Inc						
(Nam	e of corpo	ration; must inclu	de the word "INCOF	UPORATI	D", "COMPAN	Y", "CORPORAT	ION" or		
words	or abbre	viations of like im	port in language as v	vill clearly	indicate that it i	s a corporation ins	tead of a		
natura	il person o	or partnership if no	t so contained in the	name at j	present.)				
2	North	Carolina		3.	56	-1901442			
			which it is incorpora	ited)		FEI number, if app	licable)		
	.	1 100E	-		Dornoti				
4		ry 1, 1995	``	,5.	Perpetu	er corp, will cease t	o arrist on Ymarr	20 (27)	
	(Da	te of incorporation)		(Duration: 1 ea	ir corp, will cease t	o exist or perf	etuai)	
6	Upon (Qualificatio	n						
(Date	first trans	acted business in F	lorida. If corporation (SEE SECTIONS				rt "upon qualifi	ication.")	
-	2/12 54	encil Lane	Mount Airy,	NC 2	7030				•
/	232 0	ociosi Banc	(Principal of						
	0.40 ==		•						
	242 S	tencil Lane	Mount Airy,		27030			-,	1
			(Current ma	ming add	ress)			13 N.	
								D3 MAY	
۶		rical Contra						<u> </u>	- 1
	(Purpose	(s) of corporation	authorized in home	state or co	untry to be carrie	ed out in state of Fl	lorida)	တ ငွ	0,= ⊓</td
9 Nam	e and st	reet address of	Florida registered	i agent:	(P.O. Box or N	Mail Drop Box N	OT acceptable	e) 그로 중	윾ㅁ
,		-	_						SI
	Name:	Michael Kor	leski					· ω =	, , , , , , , , , , , , , , , , , , ,
		00000 **	221 21					-1 7	<u>.</u> n
Office 2	Address:	20702 Hwy.	331 N.		<u> </u>			•	•
		Paxton,			, Florida	32538			
			City)		, , , , , , , , , , , , , , , , , , , ,	(Zip code)			
		`	• /						
10. Re	gistered	agent's accepta	nce:					الا الاين	
Having	been na	med as registere	d agent and to ac	cept serv	ice of process f	for the above stat	ed corporatio	n at the pla	ce 7
aesigna	itea in in	is application, i	hereby accept the provisions of all	appoinu etatutes :	ment us fegiste ralativa to tha t	rea agent ana ag woner and colon	gree 10 uci 111 i loto norforma	inis cupacuj ineo of mv	r. 1
juruves dutios	ugree to and I am	compry wur me familiar with a	e provisions of air nd accept the obli	ouunco i oations d	elaigis to the p	is revistered ave			. han
***********		, y , , , , , , ,	4	,			- a www	He D	May water
			1///	//		//	this 13.	and and	ship.
			////	///			2005	- /%	Maken
	-	_///	16			<u></u>		geein	h-15.
			Registered	agem's s	ignature)				
1 ., Att	ached is	a certificate of	/ xistence duly auth	enticated	, not more than	90 days prior to	delivery of th	is applicatio	on to
the Dar	artment	of State, by the S	Secretary of State (or other c	official having o	custody of corpor	ate records in	the jurisdic	tion

JENICE ARMSTRONG
MY COMMISSION # CC 995375
EXPIRES: Feb 21, 2005
8003-NOTARY FL Notary Service & Bonding, Inc.

under the law of which it is incorporated.

12. Names and business addresses of officers and/or directors:

A. DIRECTO	DRS	
Chairman:		
·		
Vice Chairman:		
Address:		
<u> </u>		
Director:		
Director:		
		n 9
		C3 HLY
B. OFFICER	S	— 一
	Thomas W. Hopcraft	6 PH
	242 Changil Tana	7. 22
Address.		
771 - Th 1 1 4	Mount Airy, NC 27030	
	Judy L. Hopcraft	<u> </u>
- ,	242 Stencil Lane	
* *	Mount Airy, NC 27030	
Secretary:	Judy L. Hopcraft	
Address:	242 Stencil Lane Mount Airy, NC 27030	
Treasurer:	Thomas W. Hopcraft	-
Address:	242 Stencil Lane Mount Airy, NC 27030	
NOTE: If no	aggary year may attack an addandam to the auntication linking additional afficiency	Alam Almakama
<u></u>	essary, you may attach an addendum to the application listing additional officers ar	id/or directors.
13	(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the	application)
14	Thomas W. Hopcraft	
^ ·· ·	(Typed or printed name and capacity of person signing application)	



State of North Carolina Department of The Secretary of State

CERTIFICATE OF EXISTENCE

I, ELAINE F. MARSHALL, Secretary of State of the State of North Carolina, do hereby certify that

MAPLE GROVE ELECTRIC, INC.

is a corporation duly incorporated under the laws of the State of North Carolina, having been incorporated on the 1st day of January, 1995, with its period of duration being Perpetual.

I FURTHER certify that, as of the date set forth hereunder, the said corporation's articles of incorporation are not suspended for failure to comply with the Revenue Act of the State of North Carolina; that the said corporation is not administratively dissolved for failure to comply with the provisions of the North Carolina Business Corporation Act; that its most recent annual report required by N.C.G.S. 55-16-22 has been delivered to the Secretary of State, if applicable; and that the said corporation has not filed articles of dissolution as of the date of this certificate.



IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 5th day of May, 2003.

6 laine S. Marshall

Secretary of State

Certification Number: 6865369-1 Page: 1 of 1 Ref.# 5154193-JTW Verify this certificate online at www.secretary.state.nc.us/Verification.