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PICK-UP	☐ WAIT	MAIL		
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Certified Copies Certificates of Status				
Special Instructions to	Filing Officer:			
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TRANSMITTAL LETTER

TO: Registration Section Division of Corporations				
SUBJECT: NOVANTAGE CONSTRUC (Name of corporation	TION EQUIDMENT & PARTS, INC.			
(Name of corporation	on - must include suffix)			
Dear Sir or Madam:				
The enclosed "Application by Foreign Corporation for "Certificate of Existence", and check are submitted to to transact business in Florida.				
Please return all correspondence concerning this matte	r to the following:			
Hower Dream				
(Name of	f Person)			
HOWNED ABELL (Name of North GE CONSTRUCTION (Firm/Co	Environment & Poets INC			
(Firm/Co	ompany)			
P.O. BOX 146				
(Add	ress)			
HARRODS CREEK K.	400Z7			
(Čity/State	and Zip code)			
For further information concerning this matter, please	call: 7847 5.00 5.00 5.00 5.00 5.00 5.00 5.00 5.0			
	▼ 0			
GREG CECIL at (507	-1 491-7847 = =================================			
(Name of Person) at (SOZ) 49/-7847 (Area Code & Daytime Telephone Number)				
STREET ADDRESS:	MAILING ADDRESS:			
Registration Section	Registration Section			
ivision of Corporations Division of Corporations P.O. Box 6327				
Tallahassee, FL 32399	Tallahassee, FL 32314			
	,			
Enclosed is a check for the following amount:				
☐ \$70.00 Filing Fee ☐ \$78.75 Filing Fee & ☐ Certificate of Status	I \$78.75 Filing Fee & ☐ \$87.50 Filing Fee, Certified Copy 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.	NOVANTAGE CONSTRUCTION EQUIPMENT & PARTS 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.	(State or country under the law of which it is incorporated) 3. (6/-/359663 (FEI number, if applicable)	-
4.	(Date of incorporation) 5. DEFETURE (Duration: Year corp. will cease to exist or "perpetual")	_
6.	(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.)	<u>-</u>
7.	978 LOGIAN ST LOUISVILLE, Ky 40204 (Principal office address)	-
	(Principal office address) P.O. Box 146 HmkRobs Creek, ky 40027 (Current mailing address)	- ⊒
8.	(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)	SECRETA VISION OF
	Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable) Name: ABELL	RY OF ST
Oi	ffice Address: 17339 NEW BRANDY BRANCH ROAD 5	ALONS TE
	(City) (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 business addresses of officers and/or directors:

A. DIREC	_		
Chairman: _	HOWARD NBEZL		
Address: _	8308 WOLF PEN BRANCH KD		
	8308 WOLF PEN BRANCH RO PROSPECT Ky 40059		
Vice Chairm	nan:		
Address: _			
Director: _			·
Address: _			
_			
Director: _			
Address: _			
			
B. OFFIC			
President: _	HOWARD NBELL	8	<u> </u>
Address: _		<u>=</u>	SION SI
_			弱
Vice Preside	ent:	골	광유 ⁻
Address: _		_	- EE
_			-
Secretary: _			
Address:			
Treasurer:			
Address: _			
NOTE 1			
NOTE: II	necessary, you may attach an addendum to the application listing additional officers and/or dis	rectors.	
13.	(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the applica	tion)	
14.	HOWARD NBEZL, PRES.	,	
	(Typed or printed name and capacity of person signing application)		



John Y. Brown Secretary of State

Certificate of Existence

I, John Y. Brown, Secretary of State of the Commonwealth of Kentucky, do hereby certify that according to the records in the Office of the Secretary of State,

ADVANTAGE CONSTRUCTION EQUIPMENT & PARTS, INC

is a corporation duly organized and existing under KRS Chapter 271B, whose date of incorporation is April 16, 1999 and whose period of duration is perpetual.

I further certify that all fees and penalties owed to the Secretary of State have been paid; that articles of dissolution have not been filed; and that the most recent annual report required by KRS 271B.16-220 has been delivered to the Secretary of State.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my Official Seal at Frankfort, Kentucky, this 27th day of May, 2003.

E TOTAL TOTA

John G. Brown, III

John Y. Brown III Secretary of State Commonwealth of Kentucky Tmorgan/0472670