

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H04000037819 3)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)205-0383

From:

Account Name

: C T CORPORATION SYSTEM

Account Number : FCA000000023

Phone

: (850)222-1092

Fax Number

: (850)222-9428

FOREIGN PROFIT QUALIFICATION

Ruby & Associates, P.C.

| Certificate of Status | 1 |
|-----------------------|---------|
| Certified Copy | 0 |
| Page Count | 05 |
| Estimated Charge | \$78.75 |

Giachtaria Phias Mark

GORDONALA FILINO:

2/20/04

https://efile.sunbiz.org/scripts/efilcovr.exe

Ö

AVISION OF CARPORATION

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. | Ruby & Associates, P.C. (Professional Corporation) | | | | |
|----------|---|-----------|--|--|--|
| | (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.") | | | | |
| | and, don't don't don't | | | | |
| | | | | | |
| | (If name unavailable in Ploridz, enter alternate corporate name adopted for the purpose of transacting business in Plorida) | • • | | | |
| 2, | Michigan 3. 38-2555509 | | | | |
| | (State or country under the law of which it is incorporated) (FEI number, if applicable) | Į) | | | |
| 4. | October 1, 1984 (Date of incorporation) 5. PERPETUAL (Duration: Year corp. will cease to exist or "perpetual") | C4 FE3 | | | |
| | (Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual") | 30 | | | |
| 6. | upon qualification | \supset | | | |
| | (Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification;") | - 1 | | | |
| | (SBE SECTIONS 607.1501, 607.1502 and 817.155, F.S.) | 9. | | | |
| 7. | 30445 Northwestern Highway, Suite 310, Farmington Hills, MI 48334 | 27 | | | |
| | (Principal office address) | | | | |
| | same (O) | | | | |
| | (Current mailing address) | | | | |
| | PICASE SEE ANACHED | | | | |
| ٥. | Pupose(s) of corporation authorized in home state or country to be carried out in state of Florida) | | | | |
| | | | | | |
| Э. | Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable) | | | | |
| | Name: CT Corporation System | | | | |
| O: | effice Address: 40Ct corporation System 1200 South Pine Island Road | | | | |
| | Plantation, Florida 33324 (City) (Zip code) | | | | |
| | (City) (Zip code) | | | | |
| 10 |). Registered agent's acceptance: | | | | |
| Д | aving been named as registered agent and to accept service of process for the above stated corporation at the pla | ce | | | |
| ue | rsignated in this application, I hereby accept the appointment as registered agent and agree to act in this canacin | ı. I | | | |
| gu AN | orther agree to comply with the provisions of all statutes relative to the proper and complete performance of my d and I am familiar with and accept the obligations of my position as registered agent. | uties, | | | |
| | Claudea L. Dans. Claudia L. Saari | | | | |
| | (Registered agent's signature) Asst. Secretary | | | | |

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;

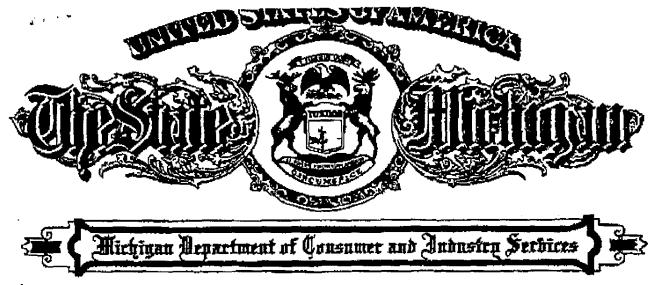
RIDER

This corporation is organized for the sole and specific purpose of rendering professional engineering services to the public by its duly licensed officers, shareholders, employees and agents, and the corporation may do all things and perform all acts necessary and incidental to the accomplishment of that purpose unless specifically prohibited by the provisions of the Professional Service Corporations Act, including investment of its funds in real estate, mortgages, stocks, bonds or any other types of investments, and ownership of real or personal property necessary or appropriate for the rendering of professional engineering services.

SECRETARY OF STATE

| - | ī | • |
|----|---|---|
| ſ | | |
| į | 1 | |
| ٠, | _ | • |

| A. DIRECTORS | | |
|---|-------------|-------------|
| Chairman: DAVID / RUBY | | |
| Address: 30445 NORTHWESTERN HIGHWAY, STE, 310 FARMINGTON HILLS, MI 48334 | | |
| FARMINGTON HILLS, MI 48334 | | |
| Vice Chairman: | | |
| Address: | | |
| | | |
| Director: | | |
| Address: | | |
| | <u> </u> | |
| Director: | | |
| Address: | <u></u> | |
| Service . | | |
| | | |
| B. OFFICERS | | |
| President: David I. Ruby | | |
| Address: 30445 Northwestern Highway, Suite 310, Farmington Hills, MI 48334 | <u>- E</u> | 71 |
| | <u>\$</u> | <u> </u> |
| Vice President: | ~ | |
| Address: | ES | ia |
| | | 2 |
| Secretary: | | |
| Address: | | |
| Treasurer: | | |
| Address: | ••• | |
| NOTE: If necessary, you may spach an addendum to the application listing additional officers and/or | directors. | |
| (Signature of Director or Officer listed in number 12 of the application) | | |
| 14. David I. Ruby, S.E., P.E., Fresident | | |
| (Typed or printed name and capacity of person signing application) | | |



Lansing, Michigan

This is to Certify That

RUBY & ASSOCIATES, P.C.

was validly incorporated on November 6, 1984, as a Michigan profit corporation, and said corporation is validly in existence under the laws of this state.

This certificate is issued pursuant to the provisions of 1972 PA 284, as amended, to attest to the fact that the corporation is in good standing in Michigan as of this date and is duly authorized to transact business and for no other purpose.

This certificate is in due form, made by me as the proper officer, and is entitled to have full feith and credit given it in every court and office within the United States.

SECRETARY OF STATE
RALLAHASSEE, FLORIDA

Sent by Facelmila Transmission 771919

In testimony whereof, I have hereunto set my hand, in the City of Lansing, this 20th day of February, 2004.

Director

Bureau of Commercial Services