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#### FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

March 31, 2004

JAMES KEPNER 911 DULUTH HIGHWAY, SUITE D-3224 LAWRENCEVILLE, GA 30043

SUBJECT: PROTECH INSTALLATION, INC.

Ref. Number: W04000012503

We have received your document for PROTECH INSTALLATION, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

A brief description of the entity's nature of business must be included in the document.

The document must have original signatures.

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) 245-6020.

Tammi Cline Document Specialist

Letter Number: 304A00021067

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### Barcom Financial & Accounting Services P.C.

Certified Public Accountants

2339 Meadow Church Way

Duluth, GA 30097



770-232-7105 FAX: 770-232-7535

e-mail:susan@barnes-cpa.com website: www.barnes-cpa.com

March 18, 2004

Florida Secretary of State Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Re: Protech Installations, Inc.

FEI: 58-2320945

Dear Sirs,

We have enclosed a check in the amount of \$87.50 for the Application by Foreign Corporation for Authorization to Transact Business in Florida. We have also enclosed a Georgia Certificate of Existence for our client, Protech Installations, Inc. If you have any further questions please feel free to contact us.

Sincerely,

Susan C. Barnes

Certified Public Accountant

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Member: American Institute of CPA's • Georgia Society Of CPA's

#### TRANSMITTAL LETTER

TO:

Registration Section

Division of Corporations	
SUBJECT: PROTECH INSTALLATION, INC.	
(Name of corporation - must include suf	fix)
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation for Authorization to Transact Business "Certificate of Existence", and check are submitted to register the above referenced foreito transact business in Florida.	
Please return all correspondence concerning this matter to the following:	
JAMES KEPNER	
(Name of Person)	
PROTECH INSTALLATION, INC.	
(Firm/Company)	
911 DULUTH HIGHWAY, Suite SUITE D-3224	
(Address)	
LAWRENCEVILLE, GA 30043 (City/State and Zip code)	
(Only/oblic and Zip code)	
For further information concerning this matter, please call:	
JAMES KEPNER at (78~ 414 - 7	7158 PR S
(Name of Person) (Area Code & Daytime Tele	ephone Number)
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	<b>P</b>
STREET ADDRESS: MAILING ADDRESS:	ယ္ 🔆
Registration Section Registration Section	<u> </u>
Division of Corporations Division of Corporation	is Sim
409 E. Gaines St. P.O. Box 6327	ā
Tallahassee, FL 32399 Tallahassee, FL 3231	4
Enclosed is a check for the following amount:	
\$70.00 Filing Fee \$78.75 Filing Fee \$ Certificate of Status Certified Copy	X \$87.50 Filing Fee, Certificate of Status & Certified Copy

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Mar.18, 2004 10:24AM

No.8870 P. 2

PROTECH INSTALLATION, INC.

58-2320945

## APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

ATX1

p.1\_

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.	PROTECH INSTALLATION, INC.		<del></del>			
	(Enter name of corporation; must include "INCORPORA"	TED," "COMPANY	"" "CORPORATION."			
	"inc.," "Ca.," "Carp." "inc." "Co." or "Carp.")					
	(If name unavailable in Florida, enter alternate corporate	name adopted for	me adopted for the purpose of transacting business in Ftorida			
2.	GEORGIA	3.	58-2320945			
	(State of country under the law of which it is incorpora		(FEI number, if applical	ble)		
<b>J</b>	4/1/1997		RPETUAL			
	(Date of Incorporation)	(1	Duration: Year corp. will cease to ex	ist or "perpetual")		
3.	UPON QUALIFICATION					
	(Date first transacted business in Florida. If corporat		· · · · · · · · · · · · · · · · · · ·	r qualification.")		
	(SEE SECTIONS 60	07 1501. 607 <del>1</del> 502	and 817.155. F.S.)			
۲.	911 DULUTH HIGHWAY, SUITE D-3224 LAWRENCE	VILLE GA. 30043				
		ncipal office addre	es)	<del></del> -		
	911 DULUTH HIGHWAY, Suite SUITE D-3224, LAWRE	mcEVILLE, GA 3		<del></del>		
		?	11 + - (	)		
3.	Burgles & fire alarm	unsla	Nation some	CTU		
	(Purpose(s) of corporation authorized in	home state or cou	ntry to be carried out in state of Flori			
) <u>.</u>	Name and <u>street address</u> of Florida registered agent:	(P.O. Box or Mail	Orop Box <u>NOT</u> acceptable)	O4 APR -8		
	Name: JAMES KEPNER			<b>→</b>		
			<del></del>	6		
	Office Address: 1517 NORTHEAST 1ST AVE		<del></del>	3		
	FORT LAUDERDALE		Florida 33304	<b>မှ</b> ့်ကြ		
	(City)		(Zip code)	- 5		
				م الم		
	Registered agent's acceptance:			ماند دن		
	ving been named as registered agent and to accept ser signated in this application, I hereby accept the appoint					
	ther agree to comply with the provisions of all statutes	_		•		
	d I am familiar with and accept the obligations of my po					
	//a U		you will &a			
	(Regist	tered agent's signs	Kure)	-04		

- 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:

PROTI	ECH INSTALLATION, INC.	58-2320945	ATX1
DIREC	TORS		
hairman:	NEAL INGRAM		
ddress:	911 DULUTH HIGHWAY, STE I	D-3224	
	LAWRENCEVILLE, GA 30043		
ine Obeim			
ice Chaim			
ddress:	911 DULUTH HIGHWAY, STE.	D-3224	
	LAWRENCEVILLE, GA 30043		
irector:			
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uu1633.			
. OFFIC	CERS		
resident:	NEAL INGRAM	P P R	1/0 
ddress:	911 DULUTH HIGHWAY, SUIT		
	LAWRENCEVILLE, GA 30043	ය -	
ice Presid	dent: JAMES KEPNER	<u>ဒ</u> ို	ာ (၁) - ၂: တ - ၂: တ
ddress:	911 DULUTH HIGHWAY, SUIT	<del></del> -	ALIE ME
	LAWRENCEVILLE, GA. 30043		秀
Secretary:			
ddress:			
reasurer:			
Address:			
IOTE: If n	ecessary, you may attach an add	dendum to the application listing additional officers and/or directors.	
3.	now chy	ature of Director or Officer listed in number 12 of the application)	
	Meal In	ature of Director or Officer listed in number 12 of the application)	
	No at	CO .A	

# Secretary of State

Corporations Division 315 West Tower #2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530 CONTROL NUMBER: K713325
DATE INC/AUTH/FILED: 04/01/1997
JURISDICTION: GEORGIA
PRINT DATE: 03/16/2004
FORM NUMBER: 211

BARCOM FINANACIAL SUSAN BARNES 2339 MEADOWCHURCH WAY DULUTH, GA 30097

#### CERTIFICATE OF EXISTENCE

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

PROTECH INSTALLATION 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.

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Cathy Cox Secretary of State