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

July 12, 2004

RONNIE L. TAYLOR 205 HUNTER DRIVE CRESTVIEW, FL 32539

SUBJECT: TAYLOR SAFETY SOLUTIONS (TSS) INC.

Ref. Number: W04000026464

We have received your document for TAYLOR SAFETY SOLUTIONS (TSS) INC. and your check(s) totaling \$87.50. However, the document has not been filed and is being retained in this office for the following:

Unfortunately, the enclosed certified copy does not meet our filing requirements. We require a certificate of existence, which usually consists of a single sheet of paper and clearly reflects the entity is a valid entity in its home state/country. You can obtain the certificate of existence from the same office that provided you with the certified copy.

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) 245-6890.

Jason Merrick Document Specialist

Letter Number: 604A00044358

#### TRANSMITTAL LETTER

TO:	Registration Section Division of Corporatio	ns				
SURI	ECT. TAYLO	SUFF	TY SON	TIDUC	(75s) I	Nc.
SUBJECT: TAYLOR SUFFETY SOLUTIONS (75S) INC.  (Name of corporation - must include suffix)						
Door S	ir or Madams	•	•		ŕ	
Dear 9	ir or Madam:					
"Certif	closed "Application by licate of Existence," and t business in Florida.					
Please	return all correspondenc	e concerning th	nis matter to the f	ollowing:		
	Romme Taylor Sa	سسيد ر		_		
	BUNNIE	for 1 day	Name of Person	)	·····	<u> </u>
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***************************************	Jaylor Sa	Ferry So	O TUTTOMS	<u>(/33.</u>	June.	······································
		(	(Firm/Company)			
	205 Hun	ter D.	(Address)	····		
	. 4.	,	(Address)			
	Crastuleu	, FL	3253	9		
		(Ci	ity/State and Zip	code)		- · · · · · · · · · · · · · · · · · · ·
For fur	ther information concern	ing this matter	nlease call			
. 01 200	with automation concoll	me and manor	, prease our.		-	- L
Ro.	me 1. Tout	en at (	850 1	82 - 5	1216	₹ : ¹
	(Name of Person)		(Area Code &	Daytime Tele	phone Number)	
•	. <u>LB</u> 198 T			÷	en e	E SE
		* •		•		5
	STREET ADDRESS:			MAILING	ADDRESS:	5 8
	Registration Section			Registration		2 200
Division of Corporations  Division of Corporations  Division of Corporations				2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2		
	409 E. Gaines St. Tallahassee, FL 32399			P.O. Box 63		ع است آنيءَ مسيس
Tallahassee, FL 32399 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  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.

i. TAYLOR  (Enter name of co "Inc.," "Co.," "Co	rporation; must include "INCORPORATED," "COMPANY," "CORPORATION," rp," "Inc," "Co," or "Corp.")
SAFETY (If name unavaila	SOLUTION 5 TWC.  ble in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
2. Delas	ander the law of which it is incorporated)  3. 20-1187098  (FEI number, if applicable)
_	
4. Date:	MAY 2004  5. Perpetual  (Duration: Year corp. will cease to exist or "perpetual")
0.	(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. 205	Hunter Drive Crestulew FL 32539 (Principal office address)
San	
	(Current mailing address)
8	of corporation authorized in home state or country to be carried out in state of Florida)
9. Name and street	address of Florida registered agent: (P.O. Box NOT acceptable)
Name:	Ronnie L. Taylor
Office Address:	205 Hunter Dr.
•	205 Hunter Dr.  Livestview , Florida 32539 (City) (Zip code)
	(City) (Zip code)
10. Registered ag Having been name	ent's acceptance:  d as registered agent and to accept service of process for the above stated corporation at the place application, I hereby accept the appointment as registered agent and agree to act in this capacity. I
further agree to co	imply with the provisions of all statutes relative to the proper and complete performance of my duties 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	TORS
Chairman: _	Rounce L. Taylor
Address:	205 Hunter Dr. Coestriew FL 32539
Vice Chairm	an:
Address:	
Director:	Ronne L. Taylor
Address:	Same
Director:	
Address:	
	Ronnie L. Taylor Same
	nt:
Secretary:	Starey L. Taylor P. SEC.
Address:	
Treasurer:	
Address:	
NOTE: If	necessary, you may attach an addendum to the application listing additional officers and/or directors.
13	(Signature of Director or Officer listed in number 12 of the application)
14	(Signature of Director of Officer risted in number 12 of the application)



PAGE 1

### The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "TAYLOR SAFETY SOLUTIONS (TSS), INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-SEVENTH DAY OF JULY, A.D. 2004.



Darriet Smith Hindson

AUTHENTICATION: 3256818

DATE: 07-27-04

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