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(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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TRANSMITTAL LETTER

TO: Registration Section Division of Corporations
SUBJECT: QUALITY Air Tool Repair INC. (Name of corporation - must include suffix)
Dear Sir or Madam:
The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," and check are submitted to register the above referenced foreign corporation to transact business in Florida.
Please return all correspondence concerning this matter to the following: Robin K Calloway
Quality Air TOOL Repair INC (Firm/Company)
2922 Kerusic Are
For further information concerning this matter, please call:
(City/State and Zip code)
For further information concerning this matter, please call:
Robin Gallowary at (843) 395 1999 (Name of Person) (Area Code & Daytime Telephone Number)
STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399 MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 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. (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION." "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.") (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida) (State or country under the law of which it is incorporated)

3. 57-0814830

(FEI number, if applicable) (Duration: Year corp. will cease to exist or "perpetual") (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Office Address: 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. DIRECTORS
Chairman: JACKie G. COOFLEY SY
Address: 1088 Blueberry Bush 10
Summerton Sc 29148
Vice Chairman: JACkie G. GOOFBey JY.
Address: 4249 Monterey Dr.
Florence SC 29501
Director: Jasm & Gooffray
Address: 391 5. Addison B
Florence SC 29501
Director:
Address:
B. OFFICERS_ 22 THE
President: JACKIE G. GODFREY SY. 3
Address: 1088 Plyeberry Bush Pd. " #
Summerton SC 29148
Vice President: JACKIE G. GODFREY Dr.
Address: 4249 Montevey Dr.
Florence 50 29501
Secretary: JASM G. GOOFLEY
Address: 391 5. ADDISON Dr Florence SC 29501
Treasurer: Jane 95 Sloretay
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)
The tip C Colors of The application V. Pres - "
(Typed or printed name and capacity of person signing application)

The State of South Carolina

Office of Secretary of State Mark Hammond Certificate of Existence

I, Mark Hammond, Secretary of State of South Carolina Hereby certify that:

QUALITY AIR TOOL REPAIR, INC.,

a corporation duly organized under the laws of the State of South Carolina on May 20th, 1986, and having a perpetual duration unless otherwise indicated below, has as of the date hereof filed all reports due this office, paid all fees, taxes and penalties owed to the Secretary of State, that the Secretary of State has not mailed notice to the Corporation that it is subject to being dissolved by administrative action pursuant to Section 33-14-210 of the South Carolina Code, and that the corporation has not filed articles of dissolution as of the date hereof.

Given under my Hand and the Great Seal of the State of South Carolina this 12th day of August, 2004.

Mark Hammond

Mark Hammond, Secretary of State