

FO4000005894

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

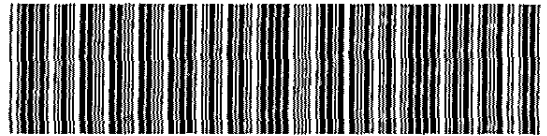
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Certified Copies _____

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10/14/04--01005--016 **8.75

10/14/04--01005--015 **78.75

RECEIVED
04 OCT 14 AM 10:51
DIVISION OF REGISTRATION

FILED
04 OCT 14 PM 12:41
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**CORPORATE
ACCESS,
INC.**

236 East 6th Avenue Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666, Fax (850) 222-2666

WALK IN

PICK UP

10/14/04 *[Signature]*

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA
OCT 14 PM 12:41

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Articles

1.) *At Power Management Systems, Inc.*
(CORPORATE NAME & DOCUMENT #)

2.)
(CORPORATE NAME & DOCUMENT #)

3.)
(CORPORATE NAME & DOCUMENT #)

4.)
(CORPORATE NAME & DOCUMENT #)

5.)
(CORPORATE NAME & DOCUMENT #)

SPECIAL INSTRUCTIONS

**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

FILED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. A+ Power Management Systems, Inc.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

~~Power Management System Installation, Inc.~~
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Tennessee 3. 32-0127144
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. Sept. 28, 2004 5. _____
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. N/A
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. Rose Paul - 631 Lucerne Ave. Lake Worth, FL 33460
(Principal office address)

(Current mailing address)

8. Electrical Contracting
(Purpose(s) 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: Rose Paul Apt. 19

Office Address: 631 Lucerne Ave.

Lake Worth, Florida 33460
(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) / Secretary/Treasurer

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:

MARK KEE - President

P.O. Box 8573

Hermitage, TN 37076

Kese Paul - Secretary/Treasurer

P.O. Box 8573

Hermitage, TN 37076

See 1st page for Officer Signature

Secretary of State
Division of Business Services
312 Eighth Avenue North
6th Floor, William R. Snodgrass Tower
Nashville, Tennessee 37243

ISSUANCE DATE: 09/28/2004
REQUEST NUMBER: 04272144
TELEPHONE CONTACT: (615) 741-6488

CHARTER/QUALIFICATION DATE: 09/28/2004
STATUS: ACTIVE
CORPORATE EXPIRATION DATE: PERPETUAL
CONTROL NUMBER: 0478387
JURISDICTION: TENNESSEE

TO:
MARC KEE
PO BOX 8573

HERMITAGE, TN 37076

REQUESTED BY:
MARC KEE
PO BOX 8573

HERMITAGE, TN 37076

CERTIFICATE OF EXISTENCE

I, RILEY C DARNELL, SECRETARY OF STATE OF THE STATE OF TENNESSEE DO HEREBY CERTIFY THAT

"A+POWER MANAGEMENT SYSTEMS, INC."

IS A CORPORATION DULY INCORPORATED UNDER THE LAW OF THIS STATE WITH DATE OF
INCORPORATION AND DURATION AS GIVEN ABOVE;
THAT ALL FEES, TAXES, AND PENALTIES OWED TO THIS STATE WHICH AFFECT THE
EXISTENCE OF THE CORPORATION HAVE BEEN PAID;
THAT ARTICLES OF DISSOLUTION HAVE NOT BEEN FILED; AND
THAT ARTICLES OF TERMINATION OF CORPORATE EXISTENCE HAVE NOT BEEN FILED

FOR: REQUEST FOR CERTIFICATE

ON DATE: 09/28/04

FROM:
MARC KEE
PO BOX 8573

HERMITAGE, TN 37076-0000

RECEIVED:	FEES	
	\$20.00	\$0.00
TOTAL PAYMENT RECEIVED:		\$20.00

RECEIPT NUMBER: 00003590244
ACCOUNT NUMBER: 00470710



Riley C Darnell

RILEY C. DARNELL
SECRETARY OF STATE