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SECRETARY OF STATE TALLAHASSEE, FLORIDA

COVER LETTER

TO: New Filing Section Division of Corporations
SUBJECT: PSC Safety and Health Services, 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:
Charles M. Finn, Esq.
(Name of Person)
Kramer Rayson LLP
(Firm/Company)
P. O. Box 629
(Address)
Knoxville, TN 37901-0629
(City/State and Zip code)
For further information concerning this matter, please call:
Charles M. Finn at (865) 525-5134
(Name of Person) (Area Code & Daytime Telephone Number)
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 MAILING ADDRESS: New Filing 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 Certificate of Status &

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.

	able in Florida, cliter alternate corporate no	ıme	adopted for the purpose of transacting business in Florida)	
Tennessee 3.		3.	62-1802558	
	under the law of which it is incorporated)	•	(FEI number, if applicable)	
10-19-1999 5.		5,	perpetual	
(Date of incorporation)		(Duration: Year corp. will cease to exist or "perpetual")		
not applic				
			n Florida, if prior to registration) 602, F.S., to determine penalty liability)	
11424-C k	*		x County, Tennessee 37922 3753	4
	(Principal office	addı	ress)	
11424-C k	Kingston Pike, Knoxville, Te	eni	nessee 37922 7777	
	(Current mailing	addı	ress)	
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occupatio	nal and health asfati, sone	14:	A.	_
	nal and health safety cons			70
(Purpose(s) of corporation authorized in home state o	or co	untry to be carried out in state of Florida)	Ω¢ "
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(Purpose(s) of corporation authorized in home state o	or co	untry to be carried out in state of Florida) AHA Box NOT acceptable)	חב וווו
(Purpose(Name and stree Name:	s) of corporation authorized in home state on the state of the state o	or co	untry to be carried out in state of Florida) AHA Box NOT acceptable)	ב יווי
(Purpose(s) of corporation authorized in home state of et address of Florida registered agent: (Michael Findley	or co	untry to be carried out in state of Florida)	0£ 1111

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: Michael D. Palmer	
Address: 11424-C Kingston Pike, Knoxville, TN 37922 37777	
Vice Chairman: Steven W. Skipper	
Address: 11424-C Kingston Pike, Knoxville, TN 37922 775760	
Director: Terence R. Crouse	
Address: 11424-C Kingston Pike, Knoxville, TN 37922 77974	
Director:	
Address:	
B. OFFICERS Michael D. Palmer	
President: Michael D. Palmer	
Address: 11424-C Kingston Pike, Knoxville, TN 37922 17979	
Vice President: Terence R. Crouse	
Address: 11424-C Kingston Pike, Knoxville, TN 37922 37171 0	
Secretary: Steven W. Skipper (Executive Vice President - Finance)	
11424 C Vingeton Dike Vnewille TN 27902 and C	
Address: 11424-C Kingston Pike, Knoxville, TN 37922 37971 Stoven W. Skinner	
Treasurer: Steven W. Skipper	
Address: 11424-C Kingston Pike, Knoxville, TN 37922 27774 5	
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/o	r directors.
13. (Signature of Director or Officer listed in number 12 of the application)	
Michael D. Palmer, President	
(Typed or printed name and capacity of person signing application)	<u></u>

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

ISSUANCE DATE: 05/04/2006 REQUEST NUMBER: 06124102 TELEPHONE CONTACT: (615) 741-6488

CHARTER/QUALIFICATION DATE: 10/19/1999 STATUS: ACTIVE CORPORATE EXPIRATION DATE: PERPETUAL CONTROL NUMBER: 0378740 JURISDICTION: TENNESSEE

161 HIGHWAY 100 ÑÁŚĦVILLE, TN 37221 REQUESTED BY: <u>8161 HIGHWAY 100</u> NASHVILLE, TN 37221

CERTIFICATE OF EXISTENCE

I, RILEY C DARNELL, SECRETARY OF STATE OF THE STATE OF TENNESSEE DO HEREBY CERTIFY THAT "PSC SAFETY AND HEALTH SERVICES, 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 THE MOST RECENT CORPORATION ANNUAL REPORT REQUIRED HAS NOT BEEN FILED WITH THIS OFFICE; AND 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: 05/04/06

CAPITAL FILING SERVICE (CFS) 8161 HIGHWAY 100

TOTAL PAYMENT RECEIVED:

RECEIVED:

\$400.00

\$0.00

NASHVILLE, TN 37221-0000

RECEIPT NUMBER: 00003940511 ACCOUNT NUMBER: 00101230

FEES \$400.00



RILEY C. DARNELL SECRETARY OF STATE