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Florida Department of State  
Division of Corporations  
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STATE OF FLORIDA  
TALLAHASSEE, FLORIDA

**FOREIGN PROFIT/NONPROFIT CORPORATION**

**PJ Services Catastrophe Solutions, Inc.**

Certificate of Status	0
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- 7/27/06  
[Signature]

# 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.

1. PJ Services Catastrophe Solutions, Inc.

(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)

2. Georgia

(State or country under the law of which it is incorporated)

3. 58-2226361

(FEI number, if applicable)

4. 01/24/1996

(Date of incorporation)

5. Perpetual

(Duration: Year corp. will cease to exist or "perpetual")

6. 09/01/2005

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

7. 4000 Wendell Drive, Atlanta, GA 30336

(Principal office address)

same

(Current mailing address)

8. See Attachment

(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: C T Corporation System

Office Address: 1200 South Pine Island Road

Plantation, Florida 33324  
(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.*

C T Corporation System

By: Rachel T. Hayes RACHEL T. HAYES  
(Registered agent's signature) ASSISTANT SECRETARY

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:

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TALLAHASSEE, FLORIDA

**A. DIRECTORS**Chairman: Corey PittsAddress: 4000 Wendell DriveAtlanta, GA 30336

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

**B. OFFICERS**President: Corey PittsAddress: 4000 Wendell DriveAtlanta, GA 30336Vice President: Ruby HowardAddress: 4000 Wendell DriveAtlanta, GA 30336Secretary: Billie PittsAddress: 4000 Wendell Drive, Atlanta, GA 30336

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. Ruby Howard, Exec. Vice-President

(Typed or printed name and capacity of person signing application)

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Attachment to Florida

**Purpose Clause**

Environmental Services Firm: to perform mold remediation, asbestos/lead abatement, Emergency Water  
& Fire Restoration, HVAC cleaning

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**STATE OF GEORGIA****Secretary of State**

Corporations Division  
315 West Tower  
#2 Martin Luther King, Jr. Dr.  
Atlanta, Georgia 30334-1530

**CERTIFICATE  
OF  
EXISTENCE**

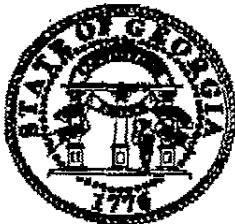
I, Cathy Cox, Secretary of State and the Corporations Commissioner of the state of Georgia,  
hereby certify under the seal of my office that

**PJ SERVICES CATASTROPHE SOLUTIONS, INC.****Domestic Profit Corporation**

was formed or was authorized to transact business on 02/06/1996 in Georgia. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated 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 date issued. 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 certificate is issued pursuant to 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.



WITNESS my hand and official seal of the City of Atlanta and  
the State of Georgia on 24th day of July, 2006

Cathy Cox  
Secretary of State

Certification Number: 195840-1 Reference:  
Verify this certificate online at <http://corp.sos.state.ga.us/corp/soskb/verify.asp>