F06000006789

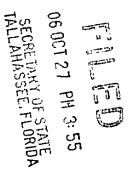
(Re	questor's Name)	
(Ad	dress)	·
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
· (Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



000081294050

10/27/06--01066--002 **78.75



MP70/30

COVER LETTER

TO: New Filing Section Division of Corporations
SUBJECT: Engineered Technical Services Inc. (Name of corporation - must include suffix)
(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 cheek are submitted to register the above referenced foreign corporation to transact business in Florida.
Please return all correspondence concerning this matter to the following:
PUSINCS Support, Inc. (Firm/Company)
117 Stowe Ave Ste A.
City/State and Zip code)
For further information concerning this matter, please call:
Michaele Sweattat (904), 264-1289 (Name of Person) (Area Code & Daytime Telephone Number)
(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:
\$76.00 Filing Fee \$78.75 Filing Fee & \$78.75 Filing Fee & Certificate of Status Certified Copy \$87.50 Filing Fee, 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 S REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLO	UBMITTED TO. DRIDA. PS S
Formandal Tall & Carine Tra	, C 00
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION."	· 2
"Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")	SEE
· - · · · · · · · · · · · · · · · · · ·	, FLO
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting	
2. Georgia 3. 58 - 2116337 (State or country under the law of which it is incorporated) (FEI number, if applied)	
4. 4/24/94 5. Perpetual (Duration: Year corp. will cease to e	
(Date of incorporation) (Duration; Year corp. will cease to e	xist or "perpetual")
6(Date first transacted business in Florida, if prior to registration)	
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability))
7. 5177 Bellewood Covet; Svite A; Buford, GA 30	518
(Principal office address)	
SAME AS Above (Current mailing address)	
8. Any and All lead business (Purpose(s) of corporation authorized in home state or country to be carried out in state of Floric	0
	da) ALLANAS
9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)	2
Namo: Im Voder	Some of the
Office Address: 10759 NW 26th Street	7 PH 3: 55
Sunkise , Florida 33322 (City) (Zip code)	95 55 95 55
(City) (Zip code)	<u>D</u> ru
10. Registered agent's acceptance:	
Having been named as registered agent and to accept service of process for the above stated of designated in this application, I hereby accept the appointment as registered agent and agree	orporation at the place
further agree to comply with the provisions of all statutes relative to the proper and complete t	o act in this capacity. I performance of my duties,
and I am familiar with and accept the obligations of my position as registered agent.	
1	
In Yoder	_
(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: N/A
Address:
Vice Chairman: N/A
Address:
Director: N/A
Address:
Address;
- Alla
Director: N/A
Address:
President: Fatrick M. Burlows Address: 5177 Bellewood Court; Suite A; Buford, GA 30518
Vice President: NA
Address:
Secretary: Kristie C. Burrows
Address: 5177 Belkwood Covet, Suite A; Buford, GA 30518
Treasurer: SAME AS SECRETARY
Address:
NOTE: It 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

Control No. K416527

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

ENGINEERED TECHNICAL SERVICES, INC.

Domestic Profit Corporation

was formed or was authorized to transact business on 06/29/1994 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 October, 2006

Cathy Cox Secretary of State

Certification Number: 355871-1 Reference: Verify this certificate online at http://corp.sos.state.ga.us/corp/soskb/verify.asp