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(Requestor's Name)				
(Address)				
· (Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

Office Use Only



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COVER LETTER

TO:	New Filing S Division of C			
SUBJ	ECT:	Engineers Constructor	rs, Inc.	
~~~		(Name of corpo	oration - must include suffix	
Dear S	Sir or Madam:			
"Certi		cation by Foreign Corporation ence," and check are submitted Florida.		
Please	return all corr	espondence concerning this m	natter to the following:	
	Slade	e F. Exley		
		(Nar	ne of Person)	
	Engi	neers Constructors, I	nc.	
	- 1:	(Firm	n/Company)	
	P. 0	.Box 22625		
		(	Address)	
	Jack	son, MS 39225-2625		
		(City/S	tate and Zip code)	
For fu	rther informati	on concerning this matter, ple	ease call:	
	Slade F	. Exley at (6	01 ) 948-3071	
	(Name of Pe	erson) (A	Area Code & Daytime Telep	hone Number)
	New Filing S Division of C Clifton Build 2661 Execut Tallahassee,	Corporations ling ive Center Circle FL 32301	MAILING A New Filing S Division of O P.O. Box 633 Tallahassee,	Section Corporations 27
	sed is a check to the sed is a check to the sed in the	for the following amount:  \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	XX \$87.50 Filing Fee, Certificate of Status & 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.

1	<u> </u>	ingineers Constructors, Inc.	•				
		rporation; must include "INCORPORAT	ED,	" "COMPANY," "CORPORATION,"			
"In	c.," "Co.," "Co	rp," "Inc," "Co," or "Corp.")		•			
716			—			<del></del>	
(11	name unavailai	ble in Florida, enter alternate corporate na	me	adopted for the purpose of transacting busin	ess in Flori	ida)	
2.	Missis	ssippi	3.	75–2978952			
	(State or country under the law of which it is incorporated)			(FEI number, if applicable)			
•		• •		SE			
4	01/25/		5.				
	(Date o	of incorporation)		(Duration: Year corp. will cease to exist o	r "perpetua	ເ[")	
6.	N/A						
·		(Date first transacted busine	ss ir	Florida, if prior to registration)			
		•		02, F.S., to determine penalty liability)			
-	666 No	orth Street, Suite 201, Jack	ksc	n. MS 39202			
/		(Principal office					
		•		•			
	P. O.	Box 22625, Jackson, MS 3923					
		(Current mailing	addı	ress)			
8	Engine	eering and contracting for	doc	gion - build projects	30	20	
··		of corporation authorized in home state o				=	
	(			,	주잠		7
9. Na	me and street	address of Florida registered agent: (	P.O	. Box NOT acceptable)	CRETARI	12 AYH LÎ	1201 (7301
		Ohara Kanlar			SERY	<u>-</u>	•
	Name:	Stan Keely		<u> </u>	щÖ	2	
Office	Address:	2600 Lake Lucien Dr., S	nit	e 117		-3E	Service Services
OHICE	Addiess.	2000 Italio Eurorem D1., o			SE	PH 12: 13	_
		Maitland,		, Florida <u>32751</u>	ਦੂਜੀ	ယ	
		(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)

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:	W. Hibbett Neel		_
Address:	666 North Street, Suite 201		_
	Jackson, MS 39202		_
Vice Chairman:	J. Gorman Schaffer		
Address:	666 North Street, Suite 201		_
	Jackson, MS 39202		_
Director:	Slade F. Exley		_
Address:	666 North Street, Suite 201		
	Jackson, MS 39202		
Director:	Frank L. O'Keefe		
Address:	666 North Street, Suite 201		
	Jackson, MS 39202	2007 SEC	
B. OFFICERS		HAY 24 CRETARY AHASSE	-
President:	Frank L. O'Keefe		1
Address:	666 North Street, Suite 201	PE SAT	)
	Jackson, MS 39202	- RATE 3	_
Vice President:	Robert R. Walker		_
Address:	666 North Street, Suite 201		_
	Jackson, MS 39202	<u>.</u>	_
Secretary:	Slade F. Exley	-	_
Address:	0 11 001 T-1 NC 20202		
Treasurer:	J. Clark Robinson		_
Address:	666 North Street, Suite 201, Jackson, MS 39202		
NOTE: If neces	sary, you may attach an addendum to the application listing additional officer	s and/or directors.	
13	Stat 1 St		
	(Signature of Director or Officer listed in number 12 of the application)		
14	Slade F. Exley, Corporate Secretary  (Typed or printed name and careeity of person signing application)		
	(Typed or printed name and capacity of person signing application)		

# State of Mississippi

### Office of the Secretary of State Eric Clark, Secretary of State Jackson, Mississippi

#### **CERTIFICATE**

I, ERIC CLARK, Secretary of State of the State of Mississippi, and as such, the legal custodian of the corporate records, required by the laws of Mississippi, to be filed in my office, do hereby certify:

That on January 25, 2002, the State of Mississippi issued a Charter/Certificate of Authority to:

ENGINEERS CONSTRUCTORS, INC.

That the state of incorporation is MISSISSIPPI.

That the period of duration is 99 years.

That according to the records of this office, Articles of Dissolution or a Certificate of Withdrawal have not been filed.

That according to the records of this office, a current Annual Report has been delivered to the Office of the Secretary of State.

I further certify that all fees, taxes and penalties owed to this state, as reflected in the records of the Secretary of State, have been paid and that the corporation is in existence or has authority to transact business in Mississippi.

STATE OF MISSES

Given under my hand and seal of office May 16, 2007

Tic Clark

ERIC CLARK Secretary of State

Certification Number: 9065416-1 Page 1 of 1 Reference: SLADE EXLEY-JH Verify this certificate online at http://www.sos.state.ms.us/busserv/corp/verify