# F07000004351

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





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1727-29125

### **COVER LETTER**

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:    Company	TO: New Filing Section Division of Corporations	
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:    Concerning this matter to the following:   Concernin	SUBJECT: Safely Plus F	ive Equipment, Inc.
"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:    Correct   Correct   Correct   Corporations	Dear Sir or Madam:	
Cary Grifus Five Equipment Inc  (Firm/Company)  P.O.Box (648  (Address)  Blakely GA 39823  (City/State and Zip code)  For further information concerning this matter, please call:  (Name of Person)  STREET/COURIER ADDRESS:  New Filing Section  Division of Corporations  Clifton Building  2661 Executive Center Circle  Tallahassee, FL 32301  Enclosed is a check for the following amount:  \$\int \frac{\text{S78.75}}{\text{Filing Fee}} \text{\$\text{S78.75}} \text{Filing Fee}, \text{\$\text{Certificate of Status}} \text{\$\text{S87.50}} \text{Filing Fee}, \text{\$\text{Certificate of Status}} \text{\$\text{Certificate of Status}}	"Certificate of Existence," and check are submitted to	
For further information concerning this matter, please call:    Concerning this matter, please call:   Concerning this matter, please call:	Please return all correspondence concerning this matter	r to the following:
For further information concerning this matter, please call:    Concerning this matter, please call:   Concerning this matter, please call:	Gary Conff	in .
For further information concerning this matter, please call:    Concerning this matter, please call:   Concerning this matter, please c	(Name o	f Person)
Color   Colo	Soldy Plus F	
For further information concerning this matter, please call:    Criffic at QQ 723-9248 (Name of Person)   (Area Code & Daytime Telephone Number)      STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building P.O. Box 6327   Tallahassee, FL 32301     Enclosed is a check for the following amount:   \$70.00 Filing Fee   \$78.75 Filing Fee & Certificate of Status   Certificate of Status & Certificate of Status & Certificate of Status & Certificate of Status   Certificate of Status & Certificate of Status   C	P (Firm/Co	mpany)
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(Name of Person)  at (229, 723-9248) (Area Code & Daytime Telephone Number)  STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301  Enclosed is a check for the following amount:  \$\int \frac{129}{370.00} \frac{78.75}{1000} \frac{1000}{1000} \frac{1000}{1	, ,	
(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  Enclosed is a check for the following amount:  \$70.00 Filing Fee \$78.75 Filing Fee & \$78.75 Filing Fee & Certificate of Status  Certified Copy  Certificate of Status	For further information concerning this matter, please of	call:
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301  Enclosed is a check for the following amount:  \$70.00 Filing Fee \$78.75 Filing Fee & Certificate of Status  MAILING ADDRESS: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314  Tallahassee, FL 32314  \$78.75 Filing Fee & S87.50 Filing Fee, Certificate of Status & Certificate of Status & Certificate of Status		723-9248
New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301  Enclosed is a check for the following amount:  \$70.00 Filing Fee \$78.75 Filing Fee & Certificate of Status \$78.75 Filing Fee & Certificate of Status \$200 Certificate of Status \$2	(Name of Ferson) (Area	code de Daytime Telephone Number)
Enclosed is a check for the following amount:  \$\begin{align*} \pm	New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle	New Filing Section Division of Corporations P.O. Box 6327
\$70.00 Filing Fee \$\ \tag{S78.75 Filing Fee & Certificate of Status}\$\$78.75 Filing Fee & Certificate of Status & Certificate o		•
Certificate of Status Certified Copy Certificate of Status &	Enclosed is a check for the following amount:	





#### FLORIDA DEPARTMENT OF STATE Division of Corporations

June 19, 2007

GARY GRIFFIN SAFETY PLUS FIRE EQUIPMENT, INC. PO BOX 648 BLAKELY, GA 39823

SUBJECT: SAFETY PLUS FIRE EQUIPMENT, INC.

Ref. Number: W07000029125

We have received your document for SAFETY PLUS FIRE EQUIPMENT, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The entity's period of duration must be listed on the application. Please insert the word "perpetual", if a specific date of dissolution or term of existence has not been specified.

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

The registered agent must sign accepting the designation.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6879.

Ruby Dunlap Regulatory Specialist New Filing Section

Letter Number: 407A00040735

## 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.
SASety Plus Fire Equipment 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. (State or country under the law of which it is incorporated)  (State or country under the law of which it is incorporated)  (FEI number, if applicable)
4. 3-25-99 5. DeRDetIA
(Date of incorporation) (Duration: Year corp. will cease to exist 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. 3688 Hwy 39 No Blakely GA 39823
(Principal office address)
Pro, Box 648 Blakely 6A 39823 (Current mailing/address)
Inspection, maintenace & Recharge of Fire Ext.
8. Inspection maintenace a Instalation of Fire Sympetical Systems (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)
9. Name and <u>street address</u> of Florida registered agent: (P.O. Box <u>NOT</u> acceptable)
Name: Jeffrey Clayton  Office Address: 111 Stone Drive
Office Address: 111 Stone Drive
Port 5t Joe Florida 32546 (City) (Zip code)
(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.
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$1.41 \pm 0.0$
(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: Address: Vice Chairman: Address: Director: Address: Address: **B. OFFICERS** Vice President: Address: Address: \_\_\_ Treasurer: Address: NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. (Signature of Director or Officer listed in number 12 of the application) 14. \_\_\_\_\_

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

Control No. K913100

## STATE OF GEORGIA

## Secretary of State

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

## CERTIFICATE OF EXISTENCE

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SECONE LARRY OF STATION

I, Karen C Handel, Secretary of State and the Corporations Commissioner of the state of Georgia, hereby certify under the seal of my office that

#### SAFETY PLUS FIRE EQUIPMENT, INC.

#### **Domestic Profit Corporation**

was formed or was authorized to transact business on 03/25/1999 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 28th day of August, 2007

Karen C Handel Secretary of State

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Certification Number: 1608407-1 Reference: Verify this certificate online at http://corp.sos.state.ga.us/corp/soskb/verify.asp