

F07000005429

(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:

Scott

GAVE

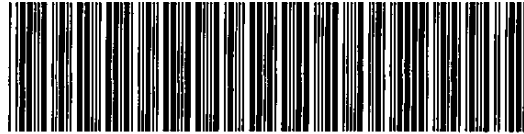
AUTHORIZATION BY PHONE TO

DIRECT # 1 name

TE 10/31/07

BY JC. EXAM DW/ite

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2007 OCT 31 P 3:41
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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D. WHITE NOV - 1 2007

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Florida Analytical, 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:

Julie Langford
(Name of Person)
LMP, Inc
(Firm/Company)
2790 Whitten Rd
(Address)
Mphs TN 38133
(City/State and Zip code)

For further information concerning this matter, please call:

Julie Langford at 901, 213-2407
(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 & Certificate of Status ☐ \$78.75 Filing Fee & Certified Copy ☒ \$87.50 Filing Fee, Certificate of Status & Certified Copy



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 31, 2007

JULIE LANGFORD
LMP, INC.
2790 WHITTEN RD
MEMPHIS, TN 38133

SUBJECT: FLORIDA ANALYTICAL, INCORPORATED
Ref. Number: W07000036934

We have received your document for FLORIDA ANALYTICAL, INCORPORATED and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Unfortunately, the enclosed certified copy does not meet our filing requirements. We require a certificate of existence or certificate of good standing, which usually consists of a single sheet of paper, that clearly reflects the entity is a valid entity in its home state/country. You can obtain the certificate of existence or certificate of good standing from the same office that provided you with the certified copy.

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.

Please return 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) 245-6933.

Dale White
Document Specialist

Letter Number: 907A00047443

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT
BUSINESS IN FLORIDA

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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. Florida Analytical Incorporated
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

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(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. TN 3. 26 0284777
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 5/24/2007 5. Perpetual
(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. 4320 Old Hwy 37, Labeland, FL 33813
(Principal office address)

2790 Whitten Rd, Mphs TN 38133
(Current mailing address)

8. Analytical Testing
(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: Karen Mort

Office Address: 4320 Old Hwy 37
Labeland, FL, Florida 33813
(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.

Karen Mort
(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: Scott McKee
Address: 15 Cedar Creek Way
Moscow TN 38052
Vice Chairman: Nathan Pera
Address: 1350 Fox Grape Cove
Germantown, TN 38138
Director: Chris Langford
Address: 9015 Anderton Springs Dr
Bartlett TN 38133
Director: _____
Address: _____

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TALLAHASSEE, FLORIDA

B. OFFICERS

President: Scott McKee
Address: 15 Cedar Creek Way
Moscow TN 38052
Vice President: Nathan Pera
Address: 1350 Fox Grape Cove
Germantown, TN 38138
Secretary: Chris Langford
Address: 9015 Anderton Springs, Bartlett TN 38133
Treasurer: Chris Langford
Address: _____

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. Chris Langford
(Signature of Director or Officer listed in number 12 of the application)
14. CHRIS LANGFORD Sect/Treasurer
(Typed or printed name and capacity of person signing application)

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

ISSUANCE DATE: 08/03/2007
REQUEST NUMBER: 07215579
TELEPHONE CONTACT: (615) 741-6488

CHARTER/QUALIFICATION DATE: 05/24/ 07
STATUS: ACTIVE
CORPORATE EXPIRATION DATE: PERPETUAL
CONTROL NUMBER: 0549663
JURISDICTION: TENNESSEE

TO:
KROLL
1900 CHURCH ST
NASHVILLE, TN 37203

REQUESTED BY:
KROLL
1900 CHURCH ST
NASHVILLE, TN 37203

CERTIFICATE OF EXISTENCE

I, RILEY C DARNELL, SECRETARY OF STATE OF THE STATE OF TENNESSEE DO HEREBY CERTIFY THAT

"FLORIDA ANALYTICAL INCORPORATED"

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 ARTICLES OF DISSOLUTION HAVE NOT BEEN FILED; AND
THAT ARTICLES OF TERMINATION OF CORPORATE EXISTENCE HAVE NOT BEEN FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FOR: REQUEST FOR CERTIFICATE

ON DATE: 08/03/07

FROM:
KROLL DOCUMENT FILING & RETRIEVAL SVCS
1900 CHURCH STREET
SUITE 400
NASHVILLE, TN 37203-0000

RECEIVED: FEES \$40.00 \$0.00
TOTAL PAYMENT RECEIVED: \$40.00
RECEIPT NUMBER: 00004250551
ACCOUNT NUMBER: 00442386



Riley C Darnell

RILEY C. DARNELL
SECRETARY OF STATE

State of Florida

2570

Check Number: 2570
Check Date: Jul 30, 2007

Check Amount: \$87.50

Discount Taken Amount Paid

Miscellaneous

87.50

FLORIDA AERIAL RAC

2570

Check Number: 2570

Jul 30, 2007

Memo:

87.50

Eighty-Seven and 50/100 Dollars

State of Florida

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TALLAHASSEE, FLORIDA



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