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(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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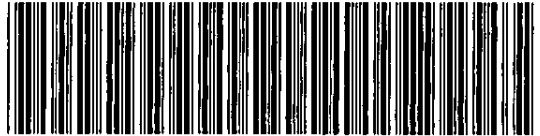
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MRD
3/28

10708-12848

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Equipment Express of the Carolina's, 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:

Christine Griffin "Tina"

(Name of Person)

Equipment Express of the Carolina's, Inc.

(Firm/Company)

P.O.Box 1884

(Address)

Cary, North Carolina 27511

(City/State and Zip code)

For further information concerning this matter, please call:

Christine Griffin "Tina"

(Name of Person)

at (919) 389-9958

(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

March 11, 2008

CHRISTINE GRIFFIN
EQUIPMENT EXPRESS OF THE CAROLINA'S, INC
PO BOX 1884
CARY, NC 27511

SUBJECT: EQUIPMENT EXPRESS OF THE CAROLINA'S, INC.
Ref. Number: W08000012848

We have received your document for EQUIPMENT EXPRESS OF THE CAROLINA'S, 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):

Please complete the principal and mailing address for the corporation in number #7. The registered agent page should have been sent with this filing.

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.

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

Ruby Dunlap
Regulatory Specialist II

Letter Number: 908A00014919

850
414
4879

**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. Equipment Express of the Carolina's 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. NC 3. 20-8413807
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. January 25, 2007 5. Perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. None to date

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

7. 101 Gables Point Way, Cary, N. Carolina 27513
(Principal office address)

P.O. Box 1884, Cary NC 27511
(Current mailing address)

8. Specializing in equipment sales, leases and rentals. Arranging simple or a complete office compound for project field offices..
(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: InCorp Services, Inc.

Office Address: 17888 67th Court North

Loxahatchee, Florida 33470
(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.

A. Ailso on behalf of InCorp Services, Inc.
(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.

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TALLAHASSEE, FLORIDA

12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: These roles are all shared roles since we are a woman owned company

Address: consisting of 1 full time employee-owner-Christine Griffin and 1 part time employee-Sally Couture. Thank you

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: Christine Griffin "Tina"

Address: 901 Medlin Drive

Cary, North Carolina 27511

Vice President: Sally Couture

Address: 101 Gables Point Way

Cary, North Carolina 27513

Secretary: Christine Griffin "Tina"

Address: 901 Medlin Drive Cary, N. Carolina 27511

Treasurer: Sally Couture

Address: 101 Gables Point Way, Cary, N. Carolina 27513

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

13. _____

Christine A. Griffin
(Signature of Director or Officer listed in number 12 of the application)

14. Christine Griffin - President

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



NORTH CAROLINA

Department of The Secretary of State

CERTIFICATE OF EXISTENCE

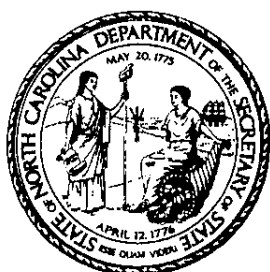
I, ELAINE F. MARSHALL, Secretary of State of the State of North Carolina, do hereby certify that

EQUIPMENT EXPRESS OF THE CAROLINA'S INC.

is a corporation duly incorporated under the laws of the State of North Carolina, having been incorporated on the 25th day of January, 2007, with its period of duration being Perpetual.

I FURTHER certify that, as of the date set forth hereunder, the said corporation's articles of incorporation are not suspended for failure to comply with the Revenue Act of the State of North Carolina; that the said corporation is not administratively dissolved for failure to comply with the provisions of the North Carolina Business Corporation Act; that its most recent annual report required by N.C.G.S. 55-16-22 has been delivered to the Secretary of State; and that the said corporation has not filed articles of dissolution as of the date of this certificate.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 25th day of March, 2008.

Elaine F. Marshall

Secretary of State