

FD8-0000041056

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

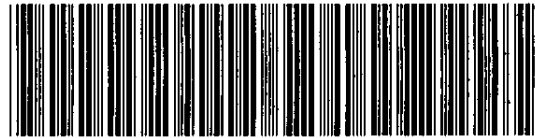
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
08 SEP 18 PM 12:04

MD 9/18

W08-42359

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Power Delivery Associates, 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:

Donna Fox

(Name of Person)

Power Delivery Associates, Inc.

(Firm/Company)

2900 Delk Rd, Suite 700 PMB 307

(Address)

Marietta, GA 30067

(City/State and Zip code)

For further information concerning this matter, please call:

Donna Fox

(Name of Person)

at (678) 562-8590 ext. 0

(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

September 11, 2008

DONNA FOX
2900 DELK ROAD, SUITE 700 PMB 307
MARIETTA, GA 30067

SUBJECT: POWER DELIVERY ASSOCIATES, INC.
Ref. Number: W08000042359

We have received your document for POWER DELIVERY ASSOCIATES, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

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) 245-6921.

Maryanne Dickey
Document Specialist Supervisor

Letter Number: 908A00049779

Power Delivery Associates, Inc.

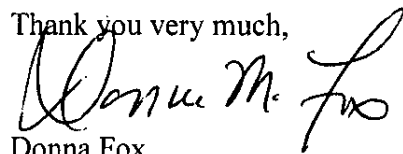
2900 Delk Road
Suite 700 PMB 307
Marietta, GA 30067

September 16, 2008

Maryanne Dickey
Florida Department of State
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

Enclosed please find the corrected document as you requested. I hope we have it completed correctly this time. We will pursue the Florida Certificate of Authority as soon as we are registered with your office.

Thank you very much,

A handwritten signature in black ink, appearing to read "Donna M. Fox". The signature is fluid and cursive, with the first name "Donna" being the most prominent part.

Donna Fox
Secretary/Treasurer

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.

08 SEP 18 PM 12:04

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SECRETARY OF STATE
DIVISION OF CORPORATIONS

1. Power Delivery Associates, 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. Georgia

(State or country under the law of which it is incorporated)

3. 20-2220386

(FEI number, if applicable)

4. 2003

(Date of incorporation)

5. perpetual

(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. 1100 Timberland Dr., Marietta, GA 30067

(Principal office address)

2900 Delk Rd, Suite 700 PMB 307, Marietta, GA 30067

(Current mailing address)

8.

Engineering Services

(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: NRAI Services, Inc.

Office Address: 2731 Executive Park Dr, Suite 4

Weston

(City)

Florida 33331

(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.

NRAI Services, Inc.

Quema M. Howarth, Asst Secy

(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: J. Greg Fox

Address: 2900 Delk Rd, Suite 700 PMB 307
Marietta, GA 30067

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: J. Greg Fox

Address: 2900 Delk Rd, Suite 700 PMB 307
Marietta, GA 30067

Vice President: Michael Jenkins

Address: 115 Strode Circle
Clemson, SC 29631

Secretary: Donna Fox

Address: 2900 Delk Rd, Suite 700 PMB 307, Marietta, GA 30067

Treasurer: Donna Fox

Address: 2900 Delk Rd, Suite 700 PMB 307, Marietta, GA 30067

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

13. Donna M. Fox
(Signature of Director or Officer listed in number 12 of the application)

14. Donna M. Fox Secretary/Treasurer
(Typed or printed name and capacity of person signing application)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
08 SEP 18 PM 12:04

Control No. 0368801

08 SEP 18 PM 12: 01
SECRETARY OF STATE
DIVISION OF CORPORATIONS

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

POWER DELIVERY ASSOCIATES, INC.

Domestic Profit Corporation

was formed or was authorized to transact business on 12/17/2003 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 9th day of September, 2008

Karen C Handel
Secretary of State