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NYISION OF CHEPORATIONS
TALLAHASSEE FLORIDA

RECEIVED

PILED 09 JUL -6 PH 4: 17 SECRETARY OF STATE

EP 7/4/09

COVER LETTER

TO:	New Filing S Division of C		ons						
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Dear S	ir or Madam:								
"Certif	closed "Applicate of Existent business in F	ence," and	_	-					in Florida," corporation to
Please	return all corr	esponden	ce concernii	ng this m	atter	to the fo	llowing:		
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For fur	ther information	on concei	ning this ma	atter, ple	ase ca	all:			
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Enclos	ed is a check f	or the fol	lowing amo	unt:					
 \$7 0	0.00 Filing Fee		8.75 Filing Certificate o				Filing Fee & ed Copy	Certi	Filing Fee, ficate of Status & fied 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. (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) (State or country under the law of which it is incorporated) (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) RUSSELLVILLE AL 3545 (Principal office address) (Current mailing address) (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: Office Address:

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:	
Address:	
Vice Chairman:	
Address:	
Director:	
Address:	
Director:	
Address:	
11021 1.10to 200 Od	
Vice President:	7 SE 09
Address:	
Secretary:	SER 3 M
Address:	Fig. E
Treasurer:	
Address:	
NOTE: If necessary, you may attach an addendum to the applic	
(Signature of Director or Officer listed in	number 12 of the application)
14. Typed or printed name and capacity of	(T

Beth Chapman Secretary of State

P.O. Box 5616 Montgomery, AL 36103-5616

STATE OF ALABAMA

I, Beth Chapman, Secretary of State of the State of Alabama, having custody of the Great and Principal Seal of said State, do hereby certify that

the domestic corporation records on file in this office disclose that Pitts Glass, Inc. incorporated in Madison County, Huntsville, Alabama on May 9, 2008. I further certify that the records do not disclose that said Pitts Glass, Inc. has been dissolved.

SECRETARY OF STATE



In Testimony Whereof, I have hereunto set my hand and affixed the Great Seal of the State, at the Capitol, in the City of Montgomery, on this day.

June 26, 2009

Date

Beth Chapman

Beth Chapman

Secretary of State