(Requestor's Name)
(Address)
(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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1019-43302
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### **COVER LETTER**

TO: New Filing Section Division of Corporations
SUBJECT: Southern Industrial Contractors, 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," or "Certificate of Good Standing" 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:
Keith Ti Dlakeney Name of Person
Southern Industrial Contractors, Inc.
P.O. Box 355
Address
Bay Springs MS, 39422
City/State and Zip code
Kblakeloo Ta Aol. Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Keith T. Blakeney at (601) 764-3008  Name of Person Area Code & Daytime Telephone Number
Name of Person — Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS: New Filing Section  MAILING ADDRESS: New Filing Section
Division of Corporations Division of Corporations
Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, FL 32314 Tallahassee, FL 32301
Enclosed is a check for the following amount:
\$70.00 Filing Fee \$\ \times \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \

REC'D OCT 1,2,2009 ...



## RECEIVED

09 OCT 16 PH 1: 57

## FLORIDA DEPARTMENT OF STATE Division of Corporations

DEPARIMENT OF STATE BIVISION OF CORPORATIONS TALLAHASSEE, FLORIDA

October 6, 2009

JEFFREY L. INSALACO SOUTHERN INDUSTRIAL CONTRACTORS INC P.O. BOX 355 BAY SPRINGS, MS 39422

SUBJECT: SOUTHERN INDUSTRIAL CONTRACTORS INC. OF MS

Ref. Number: W09000043302

We have received your document for SOUTHERN INDUSTRIAL CONTRACTORS INC. OF MS and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

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 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) 245-6934.

Loria Poole Regulatory Specialist II

Letter Number: 709A00031543

## 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," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.") (If name unavailable in Florida, enter alternate corporate name adopted for the purpose (State or country under the law of which it is incorporated) (Duration: Year corp. will cease to exist or "perpetual") (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) (Principal office address) 9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Office Address: Florida 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.

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 ousniess addresses of officers and of differois.
A. DIRECTORS
Chairman: Keith T. Dlakeney
Address: 1. (), Dot 355
Pay Springs MS: 39422.
Vice Chairman:
Address:
Director:
Address:
Director:
Address:
B. OFFICERS
President: Keith T. Blakeney
Address: 10. Box 355
Bay 5Prings M5 39422
Vice President:
Address:
Secretary:
Address:
Treasurer:
Address:
NOTE: 15 L
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. Keith T. Blakeney, Dwner
(Typed or printed name and capacity of person signing application)

# State of Mississippi

## Office of the Secretary of State C. Delbert Hosemann, Jr., Secretary of State Jackson, Mississippi

#### CERTIFICATE

I, C. DELBERT HOSEMANN, JR., Secretary of State of the State of Mississippi, and as such, the legal custodian of the corporate records, required by the laws of Mississippi, to be filed in my office, do hereby certify:

That on August 9, 1991, the State of Mississippi issued a Charter/Certificate of Authority to:

SOUTHERN INDUSTRIAL CONTRACTORS, INC.

That the state of incorporation is MISSISSIPPI.

That the period of duration is perpetual.

That according to the records of this office, Articles of Dissolution or a Certificate of Withdrawal have not been filed.

That according to the records of this office, a current Annual Report has been delivered to the Office of the Secretary of State.

I further certify that all fees, taxes and penalties owed to this state, as reflected in the records of the Secretary of State, have been paid and that the corporation is in existence or has authority to transact business in Mississippi.

STEEL STEEL

Given under my hand and seal of office October 12, 2009

C. Delbert Hosemann, Jr. Secretary of State

Dellet Hosemann, dr.

Certification Number: 11543287-1 Page 1 of 1 Reference: Verify this certificate online at https://business.sos.state.ms.us/corp/soskb/verify.asp