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COVER LETTER

New Filing Section Division of Corporations

TO:

SUBJECT: Pro-Techs Services, Incompared Name of corporation - must include suffix		
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:		
Lawanne Gillian		
Name of Person		
Name of Person Pro-Techs Services, Incorporated Firm/Company		
Firm/Company		
3318 Highway 5 # 315		
Address		
Dougla Sville, GA 30135 City/State and Zip code		
E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
Name of Person at (401) 232-9494 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 & Certificate of Status Certified Copy □ \$78.75 Filing Fee & Certified Cop		

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.") Prontect Services NE Region Inc.

f name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida) 2. Grand and a state of the purpose of transacting business in Florida)

2. Grand a state or country under the law of which it is incorporated)

4. August 13, 3008

(Date of incorporation)

(Date first transacted business in Florida, if prior to registration)

(SEE SECTIONS 607 1501 & 607 1502 E.S. to determine penalty liability) (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 7. 11111-70 San Juse Blod. Jackson, 118, Fc. 3)223

(Principal office address)

SAME OF ABUSE

(Current mailing address) 8. To Provide James Service.

(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) awina (-sillan Name: Tacksonilie , Florida 32223
(City) (Zip code) 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.

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:
Δ	DIDECTORS

FILED

Chairman	INTERIT ANTI: 29
	SEGRETARY OF STATE
Vice Cha	irman:
Address:	
Director:	·
Address:	
Director:	
Address:	
B. OFF	ICERS
President	Lawerne Gilliam
Address:	1111-70 San Jose Blod.
	JAd(900).118, FC 32223
Vice Pres	ident:
Secretary	
Address:	
Treasurer	
Address:	
NOTE:	If necessary, you may attach an addendum to the application listing additional officers and/or directors.
13	Lange Halle
	(Signature of Director or Officer listed in number 12 of the application)
14	(Typed or printed name and capacity of person signing application)

Control No. 08063465

STATE OF GEORGIA

Secretary of State

Corporations Division
315 West Tower
#2 Martin Luther King, Jr. Dr.
Atlanta, Georgia 30334-1530

CERTIFICATE OF EXISTENCE

FILED NOTES IN MIN. 29

I, Brian P. Kemp, Secretary of State and the Corporations Commissioner of the state of Georgia, hereby certify under the seal of my office that

PRO-TECHS SERVICES, INCORPORATED

Domestic Profit Corporation

was formed or was authorized to transact business on 08/13/2008 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 February, 2010

B: P.h-

Brian P. Kemp Secretary of State

Certification Number: 5058119-1 Reference:

Verify this certificate online at http://corp.sos.state.ga.us/corp/soskb/verify.asp