

FL000000745

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

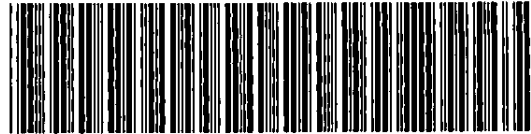
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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02/15/10--01001--008 **78.75

RECEIVED

10 FEB 12 AM 3:22

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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10 FEB 12 PM 3:29

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JA

2/12/10

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Meitec, 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:

Kathy Redyk

Name of Person

API Processing

Firm/Company

3419 Galt Ocean Drive, Suite A

Address

Ft. Lauderdale, FL 33308

City/State and Zip code

kathy@apiprocessing.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Kathy Redyk

at (954) 567-0013

Name of Person

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:

- | | | | |
|---|---|---|---|
| <input type="checkbox"/> \$70.00 Filing Fee | <input checked="" type="checkbox"/> \$78.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$78.75 Filing Fee &
Certified Copy | <input type="checkbox"/> \$87.50 Filing Fee,
Certificate of Status &
Certified 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*

1. Meitec, 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. Louisiana

3. 72-1306636

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

(FEI number, if applicable)

4. 9/26/1995

5. Perpetual

(Date of incorporation)

(Duration: Year corp. will cease to exist or "perpetual")

6. Upon Licensure

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

7. 4625 Airline Drive, Metairie, LA 70001

(Principal office address)

4625 Airline Drive, Metairie, LA 70001

(Current mailing address)

8. Electrical Contractor

(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: Dawn R. Johnson

Office Address: 3419 Galt Ocean Drive, Suite A

Ft. Lauderdale

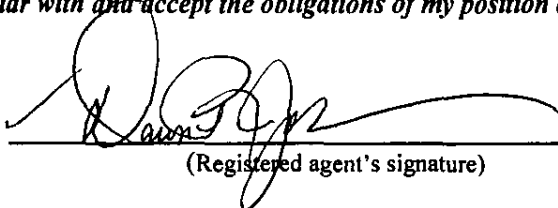
(City)

, Florida 33308

(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.



(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: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: Ross V. Bubrig

Address: 4625 Airline Drive, Metairie, LA 70001

SR Vice President: Thomas Isbell

Address: 4625 Airline Drive, Metairie, LA 70001

VP : Gary D. Williams

Address: 4625 Airline Drive, Metairie, LA 70001

VP : Ben A. Seale

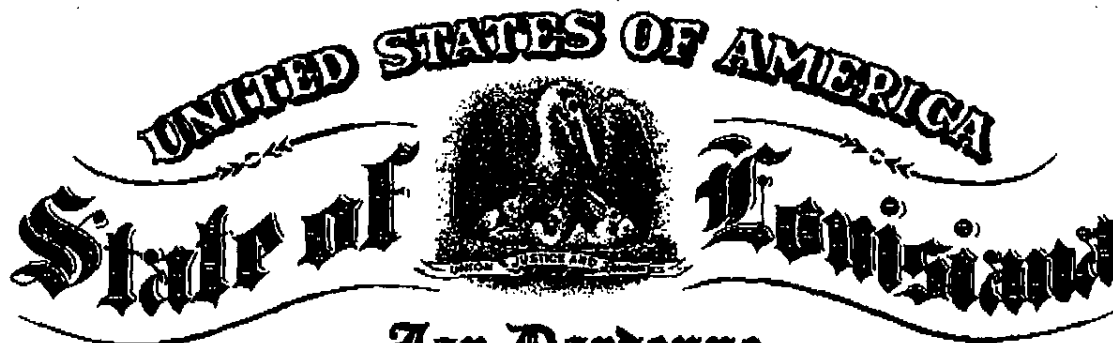
Address: 4625 Airline Drive, Metairie, LA 70001

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

13. [Signature] V-P
(Signature of Director or Officer listed in number 12 of the application)

14. Ross V. Bubrig, President
(Typed or printed name and capacity of person signing application)

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CLERK OF STATE
TALLAHASSEE, FLORIDA



Jay Bardenne
SECRETARY OF STATE

As Secretary of State of the State of Louisiana I do hereby Certify that

MEITEC, INC.

A corporation domiciled in METAIRIE, LOUISIANA,

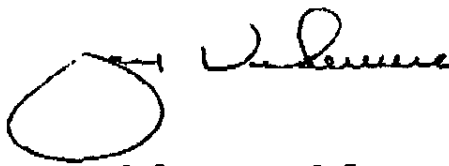
Filed charter and qualified to do business in this State on September 26, 1995,

I further certify that the records of this Office indicate the corporation has paid all fees due the Secretary of State, and so far as the Office of the Secretary of State is concerned is in good standing and is authorized to do business in this State.

I further certify that this Certificate is not intended to reflect the financial condition of this corporation since this information is not available from the records of this Office.

In testimony whereof, I have hereunto set my hand and caused the Seal of my Office to be affixed at the City of Baton Rouge on,

January 29, 2010


Secretary of State

Web GSC



Certificate ID: 10040999#R8Q82

To validate this certificate, visit the following web site, go to **Commercial Division, Certificate Validation**, then follow the instructions displayed.
www.sos.louisiana.gov