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400183427884

07/30/10--01050--003 **78.75

08/20/10--01001--007 **800.00

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COVER LETTER

TO: New Filing Section Division of Corporations
SUBJECT: Innovative Control Systems, Inc. Name of corporation - must include suffix
Name of corporation - must include surfix
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:
haven Miller Name of Person
Imovative Control Systems, Inc.
1349 Jacobsburg Road Address
Wind Cap PA 18091 City/State and Zip code
Millerk@washnet.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Person at (610) 881-8003 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 \$\square\$ \$78.75 Filing Fee & \quare\$ \$78.75 Filing Fee & Certificate of Status \$\square\$ Certified Copy \$87.50 Filing Fee, Certified Copy



FLORIDA DEPARTMENT OF STATE Division of Corporations

August 4, 2010

KAREN MILLER 1349 JACOBSBURG ROAD WIND GAP, PA 18091

SUBJECT: INNOVATIVE CONTROL SYSTEMS, INC.

Ref. Number: W10000036578

We have received your document for INNOVATIVE CONTROL SYSTEMS, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

According to the application submitted to this office, this entity transacted business in the state of Florida before properly registering with the Florida Department of State, Division of Corporations. Consequently, a \$500 civil penalty and an annual report filing fee for each year the entity failed to properly file a Florida annual report are due this office. Based on the date entered on the application, the civil penalty and annual report filing fees total \$800.00.

Please return the corrected original and one copy of 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) 245-6962.

Valerie Herring Regulatory Specialist II New Filing Section

Letter Number: 610A00018769

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," "CORPOR "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)

3. 23-2515413

(FEI number, if applicable) 9/02/2008 (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) Sanc (Current mailing address) <u>location</u> manufactures computer hardware | Suftware to 1+1/e (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida) corwast industry 9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Office Address: , Florida <u>32207</u> (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.

12. Names and business addresses of officers and/or directors: A. DIRECTORS Chairman: _____ Address: Vice Chairman: Address: Director: ____ Address: Address: B. OFFICERS President: Kevin Koad Vice President: Address: Karen Jacobsburz Hoad Wind Treasurer: ___ Address: ____ 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) Karen Miller

(Typed or printed name and capacity of person signing application)

COMMONWEALTH OF PENNSYLVANIA

DEPARTMENT OF STATE

JULY 27, 2010

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

INNOVATIVE CONTROL SYSTEMS, INC.

Is duly incorporated under the laws of the Commonwealth of Pennsylvania and remains a subsisting corporation so far as the records of this office show, as of the date herein.



IN TESTIMONY WHEREOF, I have hereunto set my hand and caused the Seal of the Secretary's Office to be affixed, the day and year above written.

Acting Secretary of the Commonwealth

Basil L. Merenda