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(Address)
(Address)
(City/State/Zip/Phone #)
,
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(Document Number)
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SECRETARY OF STATE

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COVER LETTER

TO: New Filing Section Division of Corporations
SUBJECT: ProConn Power, 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:
Melissa Griffith
Name of Person
ProConn Power, Inc.
Firm/Company
P.O. Box 12586
Address
Pensacola, FL 32591
City/State and Zip code
melissag@powerplusengineering.net
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Melissa Griffith at (850) 607-2899
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:
✓ \$70.00 Filing Fee Certificate of Status S78.75 Filing Fee Certified Copy S78.75 Filing Fee Certified Copy Certified Copy S87.50 Filing Fee, Certified Copy 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. ProConn Powe	er, inc.			
	corporation; must include "INCORPORATED,	" "COMPANY," "CORPORATION,"		
"Inc.," "Co.," "C	Corp," "Inc," "Co," or "Corp.")			
(If name unavail	able in Florida, enter alternate corporate name	adopted for the purpose of transacting busin	ess in Florida)	
2. Connecticut	3.	20-2172853	<u> </u>	
(State or country	under the law of which it is incorporated)	(FEI number, if applicable)	.	
4. 01/13/2005	5.	Perpetual		
(Date	e of incorporation)	(Duration: Year corp. will cease to exist or	r "perpetual")	
6, 08/09/10				
	· · · · · · · · · · · · · · · · · · ·	Florida, if prior to registration)		
	(SEE SECTIONS 607.1501 & 607.15	502, F.S., to determine penalty liability)		
7. <u>401 N. Tarragor</u>	na St. Pensacola, FL 32501			
	(Principal office add	ress)	is Right	
P.O. Box 1258	6 Pensacola, FL 32591		8 经	
	(Current mailing add	ress)	DCT 20	
				工工工
T	neer/Electrical Subcontractor	,	<u> </u>	四倍
(Purpose(s	s) of corporation authorized in home state or co	ountry to be carried out in state of Florida)	32 t	
9. Name and street	et address of Florida registered agent: (P.C). Box <u>NOT</u> acceptable)	DA SI	₹,
Name:	NRAI Services, Inc.			
Office Address:	2731 Executive Park Drive, Suite 4			
	Weston	, Florida <u>33331</u>		
	(City)	(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.

da James Linda State Rev. AST. Secy.

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.



10 OCT 20 PM 4: 54

12. Names and business addresses of officers and/or directors:

SECRETARY OF STATE TALLAHASSEE, FLORIDA

A. DIKE	CTORS
Chairman:	
Address: .	
Vice Chair	man:
Address: _	
_	
Director:	
Address:	
_	·
Director: .	
	•
-	
B. OFFI	CERS
President:	John K. Cool
Address: _	19 Thompson Hill Rd.
	Canton, CT 06019
Vice Presid	lent: Buddy Crill
Address:	2420 Ruthrauff Rd., Suite 100 Tucson, AZ 85705
<u> </u>	2420 Ruthrauff Rd., Suite 100 Tucson, AZ 85705
Secretary:	Scott Horton
Address: 2	2420 Ruthrauff Rd., Sulte 100 Tucson, AZ 85705
Treasurer:	
Address: _	
NOTE: II	f necessary, you may attach an addendum to the application listing additional officers and/or directors.

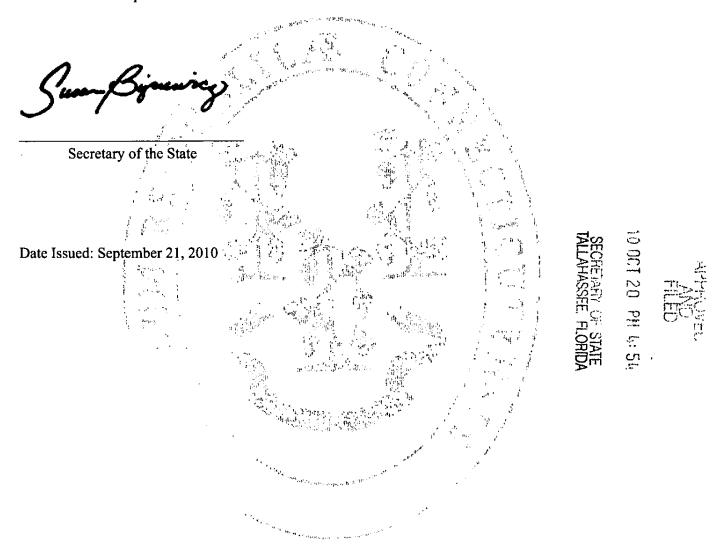
(Typed or printed name and capacity of person signing application)

Office of the Secretary of the State of Connecticut

I, the Connecticut Secretary of the State, and keeper of the seal thereof,
DO HEREBY CERTIFY, that the certificate of incorporation of

PROCONN POWER, INC.

a domestic STOCK corporation, was filed in this office on January 13, 2005, a certificate of dissolution has not been filed, the corporation has filed all annual reports, and so far as indicated by the records of this office such corporation is in existence.



Business ID: 0807616 Express Certificate Number: 2010226734001

Note: To verify this certificate, visit the web site http://www.concord.sots.ct.gov